

JONATHAN'S TRACE HOMEOWNERS ASSOCIATION

c/o Chambers Management, Inc.
12051-B Tech Road
Silver Spring, MD 20904

ARCHITECTURAL CHANGE REQUEST FORM

Applicant's Name: _____ Date: _____
Address/Lot#: _____ Home Phone: _____

Type of Alteration/Change (Please check one):

- Second Story Deck _____ Complete Section (a) below.
Ground Level Deck _____ Complete Section (a) below.
Patio _____ Complete Section (c) below.
Fence _____ Complete Section (b) below.
Other _____ Complete Section (c) below.

(a) Complete this section if you are adding a deck:

Dimensions: Across back of house _____ length out from house _____

Railing Height (from surface of deck) _____

Railing type (check one):

- 2" x 2" Picket _____
Board on Board _____
Lattice _____
Other _____ Describe _____

Type of materials (check one):

- Pressure treated pine _____ (stained/painted/other)
Other _____ Describe _____

Please use the space on the back to describe any additional attachments, such as trellis, lighting, benches, flower boxes to the deck/home.

(b) Complete this section if you are adding a fence:

Total dimensions to be fenced in _____

Fence type (check one):

- Board on Board _____
Other _____ Describe _____

Type of gate (if any) _____

Type of materials (check one):

- Pressure treated pine _____ (stained/painted/other)
Other _____ Describe _____

(c) Complete this section for any other construction or modification:

Type of construction/modification _____

Dimensions _____

Type of materials (check one):

- Pressure treated pine _____ (stained/painted/other)
Other _____ Describe _____

PLEASE BE SURE THAT YOU HAVE INCLUDED:

- 1) A copy of your lot plot - you should have received this when you settled on your home - showing the dimensions of your property and exactly where the additional structure will be.
- 2) Detailed sketches or design plans.

USE THIS SPACE FOR ANY ADDITIONAL DESCRIPTIONS:

THIS PORTION FOR COMMITTEE USE

Date received: _____ By: _____

Architectural and Environmental Control Committee Action Taken:

Your request for approval of _____
has been **APPROVED** **DISAPPROVED** (circle one)

Comments:

_____ This construction must begin within six months and be completed within two months of the date of commencement.

_____ Any damage to nearby common or private areas must be corrected within fifteen days.

_____ Any variations from the approved plans must be resubmitted.

_____ The homeowner is responsible for obtaining any applicable Montgomery County building permits.

_____ All changes must be made entirely within the homeowners property lines.

_____ The homeowner is responsible for proper upkeep of the addition/change.

_____ Please contact "Miss Utility" at 800-257-7777 prior to any digging.

_____ Special conditions: _____