

ARCHITECTURAL REVIEW BOARD REQUEST

ASSOCIATION: Manchester Estates

DATE _____

In accordance with the recorded covenants, conditions and restrictions of the association, and in order to protect each individual owner's rights and values, it is required that any owner who is considering improvements of his/her exterior deeded property to include, but not be limited to patio and deck construction, home addition, fencing, swing sets, trampoline, basketball goals, etc. submit the following to the ARB Committee PRIOR to initiating work on the planned improvements:

ARB CHECKLIST: (PLEASE BE SURE TO COMPLETE THE FOLLOWING CHECKS)

- A completed ARB Improvement Request Form
- Complete and detailed building plans, picture or brochure of the improvement, materials listing, color of project and size, etc.
- A bid from the professional installer who will be installing your project must be included. **Fences are NOT allowed to be installed in a side or rear yard easement.**
- Official surveyor's plot plan showing the location of the proposed improvement and dimensions

Please to be sure to include this checklist and all necessary documents with the ARB Committee Improvement Request Form, as incomplete applications will not be processed

FAILURE TO SUBMIT THE REQUESTED ATTACHMENTS (checklist) PRIOR TO CONSTRUCTION MAY RESULT IN DENIAL OF YOUR REQUEST FOR IMPROVEMENT. If any improvement/change is made without approval, the ARB Committee has the right to inform the homeowner to remove the improvement from the property. The committee also has the right to have the improvement removed at the homeowner's expense.

I hereby acknowledge that I have read and understand the Architectural Control Standards set forth by the HOA Board, as well as the Declaration of Covenants and Restrictions.

Homeowner's Signature

Date

Applications can be submitted the following ways:

Mail: Main Street Management, LLC
5665 N. Post Rd.
Indianapolis, IN 46216

Email: info@mainstreetmanagementllc.com

Fax: (765) 742-6401

MANCHESTER ESTATES ARCHITECTURAL REVIEW BOARD
IMPROVEMENT REQUEST FORM

PLEASE PRINT THE FOLLOWING INFORMATION:

Owner Name _____ Email Address _____
Address _____, _____, IN _____
Home Phone: _____ Work Phone: _____ (City) (Zip)

1. **Model, Unit type and lot number** _____

2. **Lot location:** (for example: pond lot, corner lot, next to play ground, etc.)

3. **Briefly describe the improvement/change that you propose:**

4. **Who will do the actual work on this improvement/change?**
 Homeowner Professional Contractor (s) Name _____

5. **Materials to be used for the improvement/change:(Wood, Concrete, Other) Color of paint or stain**

6. **Will there be changes or modifications in basic utility services or existing structures?** Yes ___ No ___
If yes, explain: _____

7. **Please indicate any building permits that will be required:** Yes _____ No _____
If yes, explain: _____

I understand that the Architectural Review Board will act on this request within 30 days of receipt and contact me in writing regarding their decision. I agree not to begin exterior property improvement without written approval from the Architectural Review Board. I understand that all improvements/changes must meet the requirements of the DCC&R's.

Homeowner's Printed Name _____ Signature _____ Date _____

Construction Start Date Estimated _____ Completion Date _____

COMMITTEE ACTION:

- Approved as submitted
- Approved with conditions stated in comments
- Deferred stated in comments
- Additional Information Required: _____
- Other: _____
- Denied stated in comments

Comments:

All approved projects must be completed in 30 Days from date of approval or request extension

Signed _____
ARCHITECTURAL REVIEW BOARD Representative Date