

**WOODSCAPE HOMEOWNERS ASSOCIATION  
APPLICATION FOR EXTERIOR CHANGE**

**Please submit this form to CYC Realty Management,  
Woodscape HOA Property Manager**

I request permission from the Board of Directors of the Woodscape Homeowners Association to make a repair, addition, alteration or improvement to the exterior of my home or property. I understand that all such changes must be approved in advance by the Board of Directors.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  Townhouse or  House

Phone \_\_\_\_\_ Email: \_\_\_\_\_

I have read the Association's By-laws and Declaration of Covenants and Restrictions as they pertain to maintenance, repairs, additions, alterations, modifications and/or improvements to the exterior of my home or property, and I (and members of my household) promise to comply with HOA rules and standards as they pertain to seeking approval; providing plans, permits, documentation and insurance; and construction according to plans submitted and approved.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Please be advised that any alteration that is not in conformance with the Association's standards and/or the approved specifications for this project may be removed by the Association with the cost of the removal being charged to the unit owner.

**TO BE COMPLETED BY APPLICANT:** Please indicate type of request and provide a detailed description. Please attach pictures, diagrams, links to product or manufacturer information. You will be asked to provide clarification and/or additional information if needed. If your proposed project is not listed, please specify in "Other" and provide detail.

- |   |  |                                      |  |   |
|---|--|--------------------------------------|--|---|
| <input type="checkbox"/> Exterior staining              | <input type="checkbox"/> Roof                      | <input type="checkbox"/> Garage Door | <input type="checkbox"/> Windows         | <input type="checkbox"/> Front Door     |
| <input type="checkbox"/> Sliding Door                   | <input type="checkbox"/> Side/Rear Door            | <input type="checkbox"/> Shutters    | <input type="checkbox"/> Gutters         | <input type="checkbox"/> Light Fixtures |
| <input type="checkbox"/> Deck                           | <input type="checkbox"/> Patio                     | <input type="checkbox"/> Gazebo      | <input type="checkbox"/> Shed            | <input type="checkbox"/> Fence          |
| <input type="checkbox"/> Porch                          | <input type="checkbox"/> Awnings                   | <input type="checkbox"/> Pool        | <input type="checkbox"/> Fire pit        | <input type="checkbox"/> Skylight       |
| <input type="checkbox"/> Landscaping                    | <input type="checkbox"/> Hardscaping               | <input type="checkbox"/> Antenna     | <input type="checkbox"/> Basketball hoop |   |
| <input type="checkbox"/> Play/swing sets and structures | <input type="checkbox"/> Driveway/paving expansion |                                      |  |   |
| <input type="checkbox"/> Other _____                    |  |                                      |  |   |

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**REQUIRED** - Detailed description of request:

Does this plan conform to existing community standards and specifications?     Yes     No     Unsure

***Please contact the Woodscape HOA Board at [board@woodscape.info](mailto:board@woodscape.info) for information about current standards, guidelines, requirements for homeowners' most frequently requested projects and for information about what your description/detail for each should include in order to expedite your request.***

WHO WILL COMPLETE THIS WORK?                       Self                       Contractor

WILL A TOWN BUILDING PERMIT OR VARIANCE BE REQUIRED?     Yes                       No                       Unsure/Unknown

HAS A TOWN BUILDING PERMIT OR VARIANCE REQUEST BEEN SUBMITTED?     Yes     No

If Yes, please attach a copy with this request.

**REMINDER** - If a contractor is being used to complete this work, homeowners should request evidence of liability and Worker's Compensation Insurance.

If this project is approved, I intend to formally contract with: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_ Phone: \_\_\_\_\_

The contractor will be employed by me, the owner of the property, not the Homeowners Association.

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**PLANS: A copy of the project plans must be submitted with this application.**

Submitted:  Yes     No     Waived

Please Note: Work must be completed within six (6) months of the approval date below. An extension may be granted upon a reasonable request from the applicant. Please notify CYC Realty Management when work is completed so you can receive a satisfactory completion letter.

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### **For Board Use Only:**

This Request:  Is pending further review upon receipt of additional information or revision, which was requested on \_\_\_\_\_.

This Request:  has  has not been approved by the Board.

Reason for non-approval (if applicable) \_\_\_\_\_

1) Board President Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2) Board Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approval letter sent on: \_\_\_\_\_ By: \_\_\_\_\_

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### **Project Completion Review:**

Reviewed by: \_\_\_\_\_ Role: \_\_\_\_\_

Project completed in a workman like fashion as per plan and approval letter

Project unfinished at this time

More work required to meet Community standards/the plan submitted/the approval letter

Follow-up letter sent on: \_\_\_\_\_ By: \_\_\_\_\_

Completion letter sent on: \_\_\_\_\_ By: \_\_\_\_\_