

Control Number	HIRST FARM	Date Received
	APPLICATION FOR EXTERIOR MODIFICATION	

This application is for property owners within the Hirst Farm subdivision to apply for approval of exterior modifications by the Hirst Farm Architectural Review Board (ARB). All modifications must be completed in accordance with the Architectural Guidelines as specified in Hirst Farm Homeowners' Association (HOA) governing documents. Applications must be received and approved PRIOR to commencing any exterior work. The mission of the Architectural Review Board is to preserve, protect, and enhance the character of the neighborhood by ensuring the design compatibility and appropriateness of new construction and alterations.

It is the goal of the ARB to review, consider, and rule on all submitted applications in a timely manner. Projects that involve extensive renovation or significant changes to the exterior of the property may require additional documentation or time to process. It is in the homeowner's best interest to provide detailed information on projects for timely decision making.

All ARB applications must include:

- A completed Application for Exterior Modification (this document);
- A detailed written description of the project (see page 2, please include additional pages if necessary).

Any applications that are not specifically for "in-kind" replacement or repair with identical materials/style/colors as the existing structure must ALSO include:

- A property plat or overview with project depicted to scale;
- Any painting/staining requests must include color sample(s);
- Any additional relevant drawings, photos, brochures, elevations, relationship to existing structures, etc. that will assist in determining the projects overall scope, impact on the neighborhood, and compliance with existing Architectural Guidelines.

SECTION 1: PROPERTY OWNER INFORMATION

Name: _____ Lot #: _____

Property Address: _____

Mailing Address (if different): _____

Email: _____

Daytime Phone: _____ Evening Phone: _____

SECTION 2: CONTRACTOR INFORMATION

Who will be completing the work on this project? Property Owner Hired Contractor

(If applicable): Contractor's Name: _____ Phone: _____

SECTION 3: PROJECT INFORMATION

Proposed Start Date: _____

Proposed Completion Date: _____

Type of Project:

- In-kind replacement of existing materials In-kind repair of damage with existing materials
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- | | | | |
|--|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Deck | <input type="checkbox"/> Fence | <input type="checkbox"/> Patio | <input type="checkbox"/> Shed |
| <input type="checkbox"/> Storm/Screen Door | <input type="checkbox"/> Awning | <input type="checkbox"/> Gazebo | <input type="checkbox"/> Pergola |
| <input type="checkbox"/> Playset | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Color Change | <input type="checkbox"/> Structural Change |
| <input type="checkbox"/> Other | | | |
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Project Scope and Description: *(Please provide a summary of the work to be completed. Detailed information will assist the ARB in making a decision as quickly as possible.)*

Project Dimensions: *(Please indicate the size/footprint of the project, if applicable.)*

Project Materials: *(Please indicate the types of materials to be used in the project. When applicable please include manufacturer make/model of building materials.)*

Project Color: *(Please indicate any color changes from existing color scheme and the colors to be used, if applicable.)*

SECTION 4: PROPERTY OWNER AGREEMENT

As the property owner submitting this application, I understand and agree to the following:

- That there are approved architectural requirements and standards within the Hirst Farm subdivision. These requirements and standards are address in the Architectural Guidelines and The Hirst Farm Declaration as adopted and approved by the Hirst Farm HOA in accordance with HOA by-laws.
- That no work on the modifications on this Application will commence until I receive written approval from Hirst Farm’s management company, Sentry Management, Inc. To do so is a violation of the Declaration of Hirst Farm and may result in my being required to remove any or all of the modifications, should they not be approved, and restore my property to its original condition at my own expense. I understand I may be held responsible for all legal fees incurred by the Proprietary in enforcing the provisions of the Declaration.
- That the Architectural Review Process has been established by the Hirst Farm Board of Directors and I agree to follow this process. I also understand that should the ARB deny my request for modification, that there is a published appeal process that may be followed.
- That any Architectural Review determinations made by the Hirst Farm Board of Directors during the appeal process are final.
- That the approval of this application is not based on any review of structural integrity or compliance with applicable building codes and regulations. I agree to comply with any and all applicable Loudoun County zoning and building codes as required. I will contact Loudoun County Department of Building and Development @ 703-777-0220 for information on any necessary permits.

Owners Name: _____

Owner’s Signature: _____

Date: _____

Return this original form and supporting documents to: Hirst Farm HOA - ARB
c/o Sentry Management, Inc
602 S. King Street SE
Leesburg, VA 20175

Or

Submit scanned copies of this form and supporting documents via email to: tplazyk@sentrymgt.com. Please include in the subject line, “Hirst Farm HOA – Request for ARB Approval”.

NOTE: A copy of this Application will be returned to you after the ARB review, along with the ARB’s decision.

ARB Use Only

ARB Approval Flow

Action Item		Date Completed		
<input type="checkbox"/>	Application received by Sentry Management			
<input type="checkbox"/>	Initial ARB member review complete			
	Homeowner follow-up required?			
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	
<input type="checkbox"/>	Homeowner follow-up complete (if required)			
<input type="checkbox"/>	Secondary ARB member review complete (if required)			

Application Status	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied

ARB Representative Signature: _____ Date: _____

ARB Comments (*Comments are mandatory if application is denied*):