

Atlantic Place Condominium Association, Inc.

c/o The Select Group, 2224 Virginia Beach Blvd., Suite 201, Virginia Beach, VA 23454
(757) 486-6000 fax: (757) 486-6988 email: Jill.C.Albright@theselectgroup.us website: www.theselectgroup.us

EXTERIOR ALTERATION APPLICATION

Please mail or deliver to: ATLANTIC PLACE CONDOMINIUM ASSOCIATION
c/o The Select Group, Inc.
2224 Virginia Beach Blvd., Suites 201/202
Virginia Beach, VA 23454
fax: (757) 486-6988 or email: mromero@theselectgroup.us

WARNING: Exterior alterations commenced without prior approval of the Architectural Committee is in violation of the covenants and is at the homeowners' own risk. (Please review all the Conditions, Restrictions, Easements, Charges and Liens.)

Name (Please print in ink or type): _____

Unit Address: _____

Phone: (h) _____ (w) _____ (c) _____

Email address: _____

APPLICATION FOR (what do you wish to add/change/replace/remove): _____

Project is expected to begin on _____ and be completed by _____

DESCRIPTION OF ALTERATION: Supplemental sheets, sketches, plats and drawings that fully describe the proposed alteration **must** be attached **before** the ACC will review the application. In case of an exterior color change, a sample of the new color along with a description of the existing color **must** be submitted.

NOTE: The Architectural Committee/Board of Directors has **forty-five (45) days** from the date an application has been **received** to approve or disapprove each application.

Owner's Signature: _____ Date: _____

***NOTE: INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT PROCESSING.**

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ARCHITECTURAL COMMITTEE ACTION FORM

NAME OF APPLICANT _____
(please print in ink or type)

UNIT ADDRESS: _____

MODIFICATION REQUESTED: _____

| | |
|------------------------|-----------|
| _____ | _____ |
| Date Approved by AC | Signature |
| _____ | _____ |
| Date Approved by Board | Signature |

_____ **DISAPPROVED** for the following reason(s):

_____ Date _____ Signature