

**FAIR WOODS HOA**  
**ARCHITECTURAL IMPROVEMENT REQUEST FORM**

Incomplete applications or those missing supplemental information will be returned.

**WORK MAY NOT COMMENCE UNTIL APPROVAL IS RECEIVED IN WRITING.**

To: Fair Woods HOA - Architectural Review Board  
C/o Sequoia Management Company, Inc.  
13998 Parkeast Circle  
Chantilly, Virginia 20151  
703-803-9641 / fax 703-968-0936  
Email : [vlopez@sequoiangmt.com](mailto:vlopez@sequoiangmt.com)

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Email Address: \_\_\_\_\_

Proposed Improvement:

Record of notification provided to two affected neighbors: (REQUIRED INFORMATION)

1. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Signature:  
\_\_\_\_\_

2. Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

Applicant must complete the following and submit in duplicate with application:

1. Site plan showing size, shape, and location of improvement to residence and to adjoining properties (including specific dimensions of improvement and distances to adjoining properties).
2. Manufacturer's brochure, if available.
3. Color samples, if applicable.
4. Architectural plans/drawings (for major additions/improvements).
5. Grading plan, if applicable.
6. Detailed written description of improvement (If not provided application will be returned pending additional information).

Applicant hereby warrants that Applicant shall assume full responsibility for:

1. All costs related to the improvement including supplies, contractor fees, cleanup, hauling, waste disposal etc.
2. All landscaping, grading, and/or drainage issues relating to the improvements.
3. Obtaining all required county approvals related to said improvements.
4. Complying with all applicable county ordinances.
5. Any damage to adjoining property (including common area) or injury to third persons associated with the improvements.

Applicant hereby states that they have read the ARC guidelines and agree that all work performed will be in compliance with those guidelines.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**ARCHITECTURAL REVIEW COMMITTEE RESPONSE**

Date Application Received \_\_\_\_\_

\_\_\_\_\_ Request approved as submitted.

\_\_\_\_\_ Request approved subject to: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Response suspended pending submission of: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Request disapproved because: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature - ARC Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature - ARC Member

\_\_\_\_\_  
Date