

The Ridge

Name: _____

Address: _____

Date: _____

Phone: _____

Email: _____

Modification Approval Form – All contact information is required

Please check boxes of modifications requested and be sure to include specific details of material, colors, styles, etc. and any additional comments.

- Fences:** Specify materials, height, style, color and sketch to scale on a copy of survey, use photos or drawings.
- Landscaping:** Bushes, trees, statuary, fountains, decorative structures, etc., to be depicted with photo, drawings and locations indicated on survey.
- In Ground Pools and Spas:** Provide plans and specifications. Also include all fencing, decking, screening and modifications, two (2) sets.
- Recreational Equipment:** Type of equipment and location on survey. Provide color, size, a photo or drawing.
- Paint:**
 - **Provide paint manufacturer with number(s):**
 - **Provide color paint chip sample(s):**
 - **Include where each color is to be used. (Siding , trim , shutters , doors , etc)**
 - **This information is required to be on file with CMA.**
 - Once CMA has received your MAF - Place paint chips at front door (taping them to cardboard or other item, protecting them from the elements) clearly indicate what paint is to be used where on your home. It is homeowner's responsibility to ensure the samples are available for review. Not supplying paint samples will cause delays.
- Roof:** Manufacturer, type, color and weight of square.
- Screening and Lattice:** Specify material, style, color, locations and elevation.
- Structure Addition:** Provide plans and specifications, two (2) sets.
- Tree Removal:** Sketch the tree location on a copy of the survey.
- Decks and Patios:** Identify material and provide plans and specifications as well as location on survey.

Other: Submit appropriate information and detailed description.

Date to Start Project: _____

Date Project will be completed: _____

For your protection, inquire with the proper authority, either city or county, regarding permit requirements before starting any work on your property involving new construction, additions, alterations, or any modifications to structural, electrical, heating, water, gas or sanitary plumbing systems.

COMMENTS:

Acknowledgment of Adjacent Homeowners (**all homeowners sharing common boundary line**): This acknowledgement will be considered by the Committee but will not be binding upon the Committee. No application will be considered unless this section is completed. If unable to get signature indicate why in signature area.

Signature _____ Lot (____) No Concern (___) Concern (___)

Signature _____ Lot (____) No Concern (___) Concern (___)

Signature _____ Lot (____) No Concern (___) Concern (___)

To be completed by Design Review Board:

Date Received: _____

Date Reviewed: _____

Signature: _____

Committee Action:

- Approved as Submitted
- Conditionally Approved
- Disapproved
- Deferred
- Withdrawn

ADDITIONAL COMMENTS:

Note: I understand and agree that no work on this request shall commence until written approval of the Modification Approval Form Committee has been received by me. I represent and warrant that the requested changes strictly conform to the community CWS (Community Wide Standards) and that these changes shall be made in strict conformance with the CWS. I understand that I am responsible for complying with all city and county regulations. Neither the Association Board of Directors, nor their respective members, Secretary, successors, assigns, agents, representatives or employees shall be liable for damages or otherwise to anyone requesting approval of an architectural alteration by reason of mistake in judgment, negligence or non-feasance, arising out of any action with respect to any submission. The Architectural Review is directed toward review and approval of site planning, appearance and aesthetics. None of the foregoing assumes any responsibility regarding design or construction, including, without limitation, the structural integrity, mechanical or electrical design, methods of construction, or technical suitability of materials. I hereby release and covenant not to sue all of the foregoing from/for any claims or damages regarding this request or the approval or denial thereof.

Owner's Signature _____
Date _____

Please include (if applicable) all color samples, dimensions, locations and descriptions with your completed application and mail to:

Community Management Associates, Inc
1465 Northside Drive
Suite 128
Atlanta, GA 30318

Or you may fax it to (404) 835-9200.

If you have any additional questions or concerns, please contact at Community Management Associates at 404 -835-9100.

If for any reason you do not hear from CMA it is your responsibility to follow up on your MAF.