

**TALL OAKS CROSSING HOMEOWNERS ASSOCIATION, INC.
APPLICATION FOR EXTERIOR ALTERATION**

NAME: _____
ADDRESS: _____
PHONE NUMBER: (H) _____ (W) _____
LOT NO. _____ BUILDER: _____

WARNING: Exterior alterations commenced without prior approval of the Architectural & Covenant Committee are in violation of the covenants and are at the applicant's own risk.

INSTRUCTIONS: Give purpose and full details of proposed change. If any painting is required, attach paint color chip. *All structural changes require a plot plan with a scaled drawing of the proposed alteration or addition.* Please limit attachments to 8 1/2" by 11" and submit in duplicate. **Applications lacking full details of proposed exterior alteration will not be processed until all details are mailed or faxed to the Association.** FAX application to 301- 953-1912 or mail application to:

Tall Oaks Crossing Homeowners Association, Inc.
c/o D. H. Bader Management Services, Inc.
14435 Cherry Lane Court, Suite 210
Laurel, MD 20707
301-953-1955

DESCRIPTION OF CHANGE REQUESTED:

NOTES:

1. Acknowledgment of your request must be obtained by all adjoining or adjacent property owners prior to submission.
2. Prior to starting to build, building permits should be obtained from the City of Bowie and Prince George's County. Further, nothing herein contained shall be construed as a waiver of modification of any said City and County restrictions. If a permit is required, then the applicant is required to provide a copy of the approved permit to the Association prior to construction.
3. Applications usually take no longer than 30 days for review. A copy of the application will be returned to you after acted upon by the Covenant Committee and the Board of Directors.
4. Applicant must contact the Covenant Committee upon completion of proposed change for verification of compliance. Work as expressed herein must be completed within 12 months of approval. Extenuating circumstances regarding completion should be brought to the attention of the ACC.

OWNERS SIGNATURE: _____ DATE: _____

ADJOINING/ADJACENT HOMEOWNERS ACKNOWLEDGMENT OF THIS APPLICATION :

Printed Name	Signature	Address	Date
Printed Name	Signature	Address	Date

TALL OAKS CROSSING ARCHITECTURAL & COVENANT COMMITTEE ACTION:

- () Application Approved as Submitted.
() Application Approved with the following provision(s):

() Application **DENIED** for the following reason(s): _____
Signed: _____ Date: _____

Committee Member
Signed: _____ Date: _____
Board Member