

**Moorings Owners Association  
ARCHITECTUAL CHANGE REQUEST**

**Return to:  
9110 Leeward Circle  
Indianapolis, IN 46256  
317-578-1168**

**HOMEOWNER REQUEST FOR CHANGE**

Please complete items 1-7 and the easement/ utility access waiver.

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

2. Briefly describe the proposed change: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Will there be changes or modifications in basic utility services or existing structures to accommodate the proposed change? Please indicate

	Yes	No		Yes	No
Electric	___	___	Exterior Walls	___	___
Telephone	___	___	Patio Fencing	___	___
Gas	___	___	Patio Slab	___	___
Water	___	___	Sidewalks	___	___
Sewage	___	___	Pavements	___	___
TV Cable	___	___	Other		

4. Please list below the major construction materials which will be used in this project. Be as specific as possible. (Exterior materials must conform to those used on the original building or be sufficiently compatible).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Will the proposed project extend beyond your property line?  
\_\_\_\_\_ Yes \_\_\_\_\_ No If "yes", please provide the name and address of the affected homeowner below.

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

6. If the proposed project is an addition or alteration that would change the structural appearance of your residence, please attach the following information:
- a. Blueprints or working drawing indicating all necessary dimensions and elevations.
  - b. If available, a photograph or drawing of a similar completed project.

7. Project schedule:

- a. The project will be done by:
  - i. \_\_\_\_ Homeowner
  - ii. \_\_\_\_ Contractor Name: \_\_\_\_\_
  - iii. \_\_\_\_ Both
- b. Please indicate the approximate time needed to complete the project, subsequent to the Committee approval \_\_\_\_\_.
- c. Please indicate any building permits that will be required. \_\_\_\_\_

**Note: A Plot Plan indicating the location and dimensions of the project must be included for any Architectural Change Request. Your plans will be returned to you if a Plot Plan is not included.**

All submitted materials shall remain the property of the Association. You may wish to make a copy for your personal records.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ARCHITECTURAL CONTROL STANDARDS SET FORTH BY THE COMMITTEE, AND THE COMMUNITY GOVERNING DOCUMENTS.

Homeowner's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**EASEMENT & UTILITY WAIVER**

(This Page is a requirement and must be filled out)

This document is an acknowledgement that I, \_\_\_\_\_,

The Owner of the Property located at \_\_\_\_\_,

Of the Moorings Owners Association, will be installing an improvement that could extend into the drainage easement or possibly could block access to utility meters or equipment. I will accept full responsibility of any cost to remove and/or replace this improvement, if the utility company or the Owners Association requires access to that area.

Signed Homeowner: \_\_\_\_\_ Date: \_\_\_\_\_

Acknowledgement by: \_\_\_\_\_ Date : \_\_\_\_\_

HOMEOWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

**COMMITTEE ONLY**

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Committee Action:

Approved as submitted

Approved as revised

Revisions: \_\_\_\_\_

Deferred

Additional Information Required:

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

Other:

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

Denied

Comments: \_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_