

**HIGHPOINITE AT RIPPON LANDING, INC.**

**APPLICATION FOR MODIFICATION**

APPLICANTS NAME: \_\_\_\_\_

ADDRESS OF PROPOSED CHANGE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

FIRST SUBMITTAL: YES: \_\_\_\_\_ NO: \_\_\_\_\_ RESUBMITTAL: YES: \_\_\_\_\_ NO: \_\_\_\_\_

**INSTRUCTIONS TO APPLICANT:**

Submit completed application form, drawings, and other required documents to:

**Highpointe at Rippon Landing**

**13998 Parkeast Cr.**

**Chantilly, VA 20151**

**Or email to:**

**LCURTIS@SEQUOIAMGMT.COM**

Describe proposed changes (attach additional sheets if needed):

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

Estimated Start Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_

(Allow 30 days for Board approval prior to start date)

1. I agree that compliance with Highponite at Rippon Landing, Inc Architectural Guidelines and Board approval does not constitute compliance with county building and zoning codes, and Board approval shall not be construed as a waiver or modification of any code restriction.
2. I agree that no changes will be started until written approval has been received by me, and that if changes are made, I will be required to return the property to its former condition at my own expense.
3. I agree that Board members or the acting agent shall be permitted to enter upon my property if requested for the purpose of inspection of the proposed change, the project in progress, and the completed project.
4. I agree that the authority granted to make the proposed changes will be revoked automatically if the changes requested have not commenced within three (3) months of the approval date and completed within six (6) months thereafter.

HOMEOWNER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_