

Brandywine Pointe Exterior Home Improvement Application

This form must be completed by the homeowner in its **entirety AND approved** by the HOA board before any work can begin. Failure to do so will result in a fine and possibly the requirement for the work to be reversed and/or removed.

Homeowner Name: _____ Date _____

Address: _____

Phone: _____ Email: _____

Brief Description of the work being done: _____

This form must be signed by ALL neighbors who will be directly affected by the proposed work.

Neighbor Name: _____ Date _____

Neighbor Address: _____

Signature: _____ Approved Not Approved

Comments regarding reason for "Not Approved" _____

Neighbor Name: _____ Date _____

Neighbor Address: _____

Signature: _____ Approved Not Approved

Comments regarding reason for "Not Approved" _____

Neighbor Name: _____ Date _____

Neighbor Address: _____

Signature: _____ Approved Not Approved

Comments regarding reason for "Not Approved" _____

Neighbors: As you are signing, please ensure you see all pages of the document including the full description of the work. Please ensure the full description aligns with the brief description at the top of the signature pages.

Homeowner Name: _____

Address: _____

Phone: _____ Email: _____

Brief Description of the work being done: _____

This form must be signed by ALL neighbors who will be directly affected by the proposed work.

Neighbor Name: _____ Date _____

Neighbor Address: _____

Signature: _____ Approved Not Approved

Comments regarding reason for "Not Approved" _____

Neighbor Name: _____ Date _____

Neighbor Address: _____

Signature: _____ Approved Not Approved

Comments regarding reason for "Not Approved" _____

As the Homeowner I certify that I have spoken with and gathered signatures from all neighbors who will be directly affected by the exterior work that I will be conducting. I have provided them with photos, descriptions, examples, or any other information they need to make an educated decision about the appropriateness of the work that will be done on the exterior of my home.

Homeowner Name: _____

Address: _____

Signature: _____

Date: _____ Phone: _____

Email: _____

Neighbors: As you are signing, please ensure you see all pages of the document including the full description of the work. Please ensure the full description aligns with the brief description at the top of the signature pages.

Full description of work being completed

Please include photos, contractor drawings, website print outs, or other information that will help to fully inform the decision on separate pages if necessary.

Homeowner Name: _____

Address: _____

Full Description of the work to be completed: _____

Location, Colors, Dimensions, etc: _____

Construction Materials: _____

Contractor or other person completing work: _____

Estimated time line for completion: _____

As the Homeowner I certify that the work listed above is in compliance with Brandywine HOA guidelines. I understand that no work can begin until I receive written approval by the board to do so. I also certify that the full description of the work outlined on this page is aligned to the work in the brief description on the signature pages signed by my neighbors.

Homeowner Name: _____

Address: _____

Signature: _____

Date: _____ Phone: _____

Email: _____

Neighbors: As you are signing, please ensure you see all pages of the document including the full description of the work. Please ensure the full description aligns with the brief description at the top of the signature pages.

This page for Brandywine HOA board use only

Approval Section:

Approve Date: _____

Approved by: _____

Approved by: _____

Approved by: _____

Approved by: _____

Approved by: _____

Approved by: _____

Approved by: _____

Denial Section:

Denial Date: _____

Reason for Denial:

Denied by: _____

Denied by: _____

Denied by: _____

Denied by: _____

Denied by: _____

Denied by: _____

Denied by: _____

Return form to

ASSOCIA TENNESSEE

Attn: Krista Bowman

278 FRANKLIN ROAD SUITE 140 BRENTWOOD, TN 37027

PHONE: 615-775-9015 FAX: 615-775-9028 EMAIL: Krista.Bowman@ASSOCIA.US

Neighbors: As you are signing, please ensure you see all pages of the document including the full description of the work. Please ensure the full description aligns with the brief description at the top of the signature pages.