

Stony Point Homeowners Association Variance Request

Stony Point Homeowner Name _____

Stony Point House number and street _____

Phone (Daytime) _____ Phone (Evenings) _____

Email Address _____

I request permission to make the following changes to the exterior of my townhouse, patio home, detached home or to the common area of the community: If it applies, include dimensions, shapes, color specific location and a list of materials to be used. Extra pages related to the details of the project, including a sketch, may be attached to this form.

Change(s) Requested: _____

Reason for changes: _____

The work will be done by _____

All contractors must provide the Association with a certificate of general liability insurance and a certificate of workers compensation insurance.

Projected project starting date _____; completion date _____

I understand that it is my responsibility to obtain any governmental permits that may be necessary for this work. **I understand that the Association reserves the right to inspect the completed work and/or revoke the variance if the results do not meet the approved submission.**

Indicate any future maintenance required by the Association: _____

Homeowner Signature _____

Date Submitted _____

Mail Form To: Stony Point Homeowners Association
% Crofton Perdue Associates, Inc
111 Marsh Rd. Suite 1, Pittsford, NY 14534
phone (585) 248-3840 Fax (585) 2483666 Email: Info@CroftonInc.com

Board of Directors Action

_____ Approved

_____ Denied

Authorized Signature _____

Date _____

Comments _____

Latest completion date after which any approval is automatically revoked and a new variance is required _____

Date that resident notified Property Management Company the work has been completed _____ . Date of compliance/completion inspection _____