

# CCCA Application for Exterior Alteration

## OWNER'S INFORMATION

PROPERTY OWNER'S NAME: \_\_\_\_\_

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

PHONE#: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

ATTACH all necessary drawings, locations, site plans, colors, and material samples. Your application may be delayed or disapproved if it is incomplete or cannot be clearly understood. If you need assistance in preparing your application, please contact the CCCA Architectural Committee at [carriagecrossingmd@gmail.com](mailto:carriagecrossingmd@gmail.com).

SHOW and explain your application to all affected neighbors. Obtain signatures from the MOST affected in the section below. (At least two (2) signatures must be obtained).

SUBMIT the completed application with all necessary attachments to [carriagecrossingmd@gmail.com](mailto:carriagecrossingmd@gmail.com). Processing of your completed application package will take no more than fifteen (15) business days. The CCCA Architectural Committee will approve or disapprove your application and send the decision to the e-mail address you provided above. If approved, you must commence your project within six (6) months after approval and complete the project within twelve (12) months of approval.

APPEALS: Any owner has the right to appeal the actions of the CCCA Architectural Committee within three (3) days after notification of its action, and you have the right to appeal a disapproval by the CCCA Architectural Committee within ten (10) days of receiving a disapproval.

AGREEMENT: With my signature, I, the submitter of this application attest that I have completed this application in good faith, and that it accurately represents the exterior alteration I propose to make. I understand that approval of this application does not authorize me to violate any provisions of the protective Covenants of the Building and Zoning Codes of Charles County. Further, nothing in this application or its approval will be understood by me to be a waiver of any of those restrictions. I understand that any construction or exterior alteration undertaken by me or on my behalf before the approval of this application is strictly at my own risk, and that I may be required to return the property to its former condition at my expense if the application is disapproved wholly or in part, and that I may be required to pay legal expenses incurred to enforce the Covenants. Also, I understand that representatives of the CCCA Architectural Committee and/or Board of Directors are permitted to enter my property at a reasonable time for the purpose of inspecting the proposed project in progress, and the completed project, and that such entry does not constitute trespass.

I certify that I am the owner of the above listed property and that if I transfer this property prior to final approval of this application by the CCCA Architectural Committee, this application shall be deemed to be withdrawn.

OWNER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

NEIGHBORS: Your signature below shows only that you are aware of this application. It does not mean that you approve of the proposal. IF YOU DISAPPROVE, or if you wish to discuss it with the CCCA Architectural Committee, check the box next to your signature below.

NEIGHBOR 1 SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ PHONE#: \_\_\_\_\_

NEIGHBOR 2 SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ PHONE#: \_\_\_\_\_