COUNSELOR'S CLOSE COMMUNITY COMPANY (THE CLOSE) ARCHITECTURAL REVIEW COMMITTEE (ARC) APPLICATION EMAIL OR MAIL APPLICATION to: TOWN MANAGEMENT

ATTN: KIMBERLY MILLS (KIM), COMMUNITY MANAGER 4801 COURTHOUSE STREET, SUITE 202, WILLIAMSBURG, VA 23188

kimberly@townmanagement.net

OWNERS: COUNSELOR'S CLOSE ADDRESS: OWNERS ADDRESS: OWNERS PHONE NUMBER: OWNERS EMAIL ADDRESS:		ADDITION DECK/PORCH COLOR CHANGE LIGHTING OTHER
REQUIREMENTS:		
<u>Project</u> - Provide a detailed description of the exterior change or modifical swatches, catalog illustrations, and a list of materials.	ation red	quested. Include drawing, pictures, color-
<u>Survey</u> – Include a copy of your survey for any proposed improvements footprint. The survey should include the dimensions and measured location in this application. Show measured distances between structures and lot	ons of a	
<u>Elevation Drawings</u> – The front, sides, and rear sketches (as appropriate) so for heights and widths. Include the roof's slope, roof overhangs' width, a placement and sizes of doors, windows, screens, and their height above §	nd the s	
<u>Construction Material</u> – Give details on the type of construction, including materials.	ng the e	exterior siding, roofing, railings, and deck
<u>Color Scheme</u> – Paint colors in The Close are selected from the "William be computer matched at local paint stores. Attach paint chip samples of colors you plan to retain. Please designate area(s) you wish to change, i.e.	colors r	equested and as precisely as possible the
<u>Building Permit</u> – If a city building permit is required, it must be display must comply with the City of Williamsburg Building Codes and be inspective City of Williamsburg Codes Compliance Office at 220-220-6136 for inspective City of Williamsburg Codes Compliance Office at 220-220-6136 for inspection.	ted by t	the city as required by the Code. Contact
Additional Requirements, which may apply to the construction, exterior The Close's governing documents. All owners must sign the application.	r alterat	ions, and structural changes are found in
ALL APPROVED APPLICATIONS WILL BE VALID FOR ONE-YEAR PROJECTS NOT COMPLETED WITHIN ONE-YEAR MUST APPL		
PROJECT START DATE: PROJECT	T END D	OATE:
Contractor Name and Phone Number: (if known; not required for submittal)		

Change or Addition Planned: (include size / dimensions if applicable)			
Materials Proposed: (include pictures if available)			
Owners Signature:	Date:		
DATE RECEIVED BY TOWN MANAGEMENT:			
ARC Recommendation: Date: Recommended Not Recommended Comments:	Deferred (See Comments)		
ARC Chair Signature:	Date:		
BOARD Action: Recommended Not Recommended	Deferred (See Comments)		
Board President Signature:	Date:		

ARCHITECTURAL REVIEW COMMITTEE APPLICATION
MARCH 15, 2021 – ADOPTED
JANUARY 2023 – UPDATED MANAGEMENT COMPANY INFORMATION