WINDRIDGE ARCHITECTURAL COMMITTEE

Architectural Request Form (9/20/18)

Please print and complete this form and attach additional materials, if any. Then copy and email to the office (including any attachments) or drop off at the office.

In order to expedite the review process, please provide as detailed a description as necessary to explain the proposed project, including drawings, vendor-produced diagrams, or web links if available and appropriate. Also please provide a list of the materials that will be used. Attach additional pages if necessary.

Name	Date
Windridge Address	Telephone
Email	
I (We) request that the Architectural Committee approve the f	following Proposal:
Are materials and labor at Homeowner's sole expense?	
If no, please list cost to Association	
Estimated Start Date Estimated Finish D	Date
Contractor Name, if any	Telephone
Is contractor performing work licensed and bonded? Yes	No*
*If no, you must also complete the Waiver and Release of Liab	oility form that follows on the next page.
Homeowner's Signature	_ Date
Reviewed by:	
Approved by CommitteeDenied By Committee	
Approved by Board Denied by Board	
If denied, detail reason for denial	
Final Inspection of completed project by:	Date

Windridge Homeowners Association Waiver and Release of Liability

By signing this Waiver and Release of Liability (Agreement), I waive and release (WHOA), its agents, servants, employees, successors and assigns from any and all claims, demands, causes of actions, damages or suits at law and equity of any kind, including but not limited to claims for personal injury, property damage, medical expenses, loss of services, on account of or in any related to the proposed project.

This waiver and release is intended to and does release from any and all liability for damages or injuries on account of or in any way related to or growing out of my negligence, the negligence of third parties and 's negligence. This is not intended to release (WHOA) from any liability resulting from their intentional conduct.

I further covenant and agree not to institute any claims or legal action against (WHOA) for any claim released by this Agreement. I further agree that should any claim be made against (WHOA) in contravention of this Agreement, including but not limited to derivative claims, I will protect, defend, and completely indemnity (reimburse) for any such claim and expenses including attorney's fees and costs incurred by (WHOA) in defending themselves or security indemnity hereunder.

- 2. I understand that (WHOA) is not responsible for any lost, stolen, or damaged valuables or property.
- 3. I acknowledge that I have received and read a copy of the current rules and regulations governing (WHOA). I agree that I will fully comply with all rules and regulations and with any amendments.

I have read the Agreement and understand that by signing the Agreement I have consented to be found by its terms, including the waiver/release of any legal right I may have to sue (WHOA) for any costs they incur because a claim or legal action is brought in violation of this Agreement. I am signing this Agreement freely, voluntarily and competently and am at least eighteen (18) years of age.

Name (please print	
Signature	Date
Address	
Project Description	