

# Canal Place Property Owners Association

## DEVELOPMENT CONTROL COMMITTEE

### HOMEOWNERS REQUEST FOR CHANGE

Please complete items 1 – 7 only.

DATE \_\_\_\_\_

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Lot # \_\_\_\_\_

2. Briefly describe the proposed change:

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3. Will there be changes or modifications in basic utility services or existing structures to accommodate the proposed change? Please indicate.

	YES	NO		YES	NO
Electric	_____	_____	Exterior Walls	_____	_____
Telephone	_____	_____	Patio Slab	_____	_____
TV Cable	_____	_____	Patio Fencing	_____	_____
Gas	_____	_____	Side walks	_____	_____
Water	_____	_____	Pavements	_____	_____
Sewage	_____	_____	Other	_____	_____

4. Please list below the major construction materials that will be used in this project. Be as specific as possible. (Exterior materials must conform to those used on the original building or be sufficiently compatible.)

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Please complete first two pages, sign and date the third page and return to:

Canal Place POA  
Kirkpatrick Management Co., Inc., Agent  
P.O. Box 20630  
Indianapolis, IN 46220  
800-899-6652

Will the proposed project extend beyond your property line? \_\_\_\_\_ yes \_\_\_\_\_ no  
If yes, please provide the name and address of effected homeowner or state if common area.

Name \_\_\_\_\_ Address \_\_\_\_\_ Common Area \_\_\_\_\_

5. If the proposed project is an addition or alteration that would change the structural appearance of your lot, please attach the following information.

- A. **Plot plan indicating the location and dimensions of the project.**
- B. Blue prints or working drawings indicating all necessary dimensions and elevations.
- C. If available, a photograph or drawing of a similar completed project.

6. Project schedule:

A. The project will be done by: Homeowner \_\_\_\_\_  
Contractor (Name) \_\_\_\_\_  
Both \_\_\_\_\_

B. Approximate time needed to complete project, after committee approval? \_\_\_\_\_

C. Are there any building permits required? \_\_\_\_\_

7. Adjacent Lot Owner's acknowledgment of proposed project:

Neighboring Lot Owner's signatures are required. By signing below you are acknowledging that you have been made aware of this proposed improvement and is in no way an approval or denial of said project.

Signature \_\_\_\_\_ Lot # \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Lot # \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Lot # \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Lot # \_\_\_\_\_ Date \_\_\_\_\_

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**NOTE:** All submitted materials shall remain the property of the association. You may wish to make a copy for your personal records.

I hereby acknowledge that I have read and understand the Development Control Standards set forth by the by-laws and the Development Control Committee (D.C.C.) Guidelines. Furthermore, I understand and agree that any additions, improvements, repairs, or alterations to my property are the sole responsibility of the homeowner and homeowner shall be fully responsible for maintenance, repairs, and upkeep on same.

**In addition homeowners are responsible for locating underground utilities and obtaining any necessary permits that may be required by Federal, State or local Government.**

Homeowners Signature \_\_\_\_\_ Date \_\_\_\_\_

DO NOT WRITE BELOW

Committee Action:

( ) Approved as submitted

( ) Deferred

( ) Additional information required:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

( ) Other: \_\_\_\_\_

\_\_\_\_\_

( ) Denied

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_