



## Crains Run HOA

### IMPROVEMENT APPLICATION\

#### **WHEN DO YOU FILE AN IMPROVEMENT APPLICATION?**

An application form must be submitted for any construction or addition to the exterior of your building or grounds. If in doubt about your particular project, contact Towne Properties Asset Management Company at (937) 222-2550.

#### **WHAT IS THE OBJECT OF THIS FORM?**

The object of requiring a homeowner to file an improvement application with the Board is two-fold:

1. To insure that your planned improvement conforms to the Association's Declaration, enhances the beauty of the Community, maintains the architectural harmony of the Community and in no way inconveniences your fellow homeowners.
2. To enable the Association to determine what information and assistance it can give in order to expedite completion of your planned improvement.

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ LOT# \_\_\_\_\_

DATE \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

OWNER \_\_\_\_\_ RENTER \_\_\_\_\_ LAND CONTRACT \_\_\_\_\_

TYPE AND NATURE OF REQUESTED IMPROVEMENT: \_\_\_\_\_

COLOR \_\_\_\_\_ DIMENSIONS \_\_\_\_\_ LOCATION \_\_\_\_\_

SUPPLIES \_\_\_\_\_ APPROXIMATE COST \_\_\_\_\_

CONTRACTOR NAME AND CONTACT INFORMATION \_\_\_\_\_

**A SCALE DRAWING OF ALL IMPROVEMENTS MUST BE SUBMITTED WITH THE APPLICATION TO SHOW THE EXACT LOCATION AND PLOT DIMENSIONS. THE APPLICATION WILL BE REFUSED IF THE PLOT DIMENSIONS ARE NOT INCLUDED ON THE SCALE DRAWING.**

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*I understand the rules concerning the proposed improvement. This improvement in no way encroaches on a neighbor's limited common area or common ground. I agree to abide by the rules established by the Association (Please refer to the Crain's Run Owners Association Declaration of Covenants, Conditions and Restrictions, recorded on January 27, 2000) and will be solely liable for any upkeep required by the construction of this improvement.*

*I further agree to obtain all licenses and/or building permits and to meet all legal requirements for building codes.*

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_  
----- (FOR ASSOCIATION USE) -----

Date Received \_\_\_\_\_ Received by \_\_\_\_\_

Date Approved \_\_\_\_\_ Date Disapproved \_\_\_\_\_ Letter Sent \_\_\_\_\_

Special Details or provisions for Approval \_\_\_\_\_

Return to: Towne Properties  
6540 Centerville Business Parkway  
Centerville, OH 45459

or

Fax 222-2552