## OAK CREST ESTATES HOA

## **ARCHITECTURE MODIFICATION APPLICATION**

THIS FORM MUST BE COMPLETED AND SUBMITTED TO THE OAKCREST OFFICE FOR APPROVAL BEFORE ANY WORK IS DONE ON THE EXTERIOR OF YOUR HOME/PROPERTY

	Date.	
Owner:	Unit:	(parking spot #)
Address:		
Samples attached :(X) Homeowner(s) please att new), of color, photo, shingles, etc. The more information NOTE: According to our "Amended Site Plan" with the residents are only permitted to "cover" the back yard up your lot and impermeable structures, i.e. concrete, as your survey to Township when applying for permit(s). Dear Board Members  I plan to make the following changes and/or addition necessary.	ation submitted, the quion Hamilton Township Planor To 50%. This includes for phalt, decks, sheds, etc. A	cker the approval process nning & Zoning Board, ou ootprint of all structures or Also, please bring a copy o
agree to apply for all the proper permits with the Tov Departments (609) 625-1511, in which a copy will be s construction of the above. Any damage to anyone's p	supplied to you and I take	e full responsibility for the
construction will be restored to the original condition	by my funds.  Approved by: **	
Owners Signature	O.C.HOA Arch	itectural Committee
The application is good for 60 days after approval.		
After 60 days a resubmitted form will be required.  Date of Approval:		ident or Vice President
		y (2) Oak Crest Board Members
NOTE: Failure to submit form will result in a \$250.00 Fine b	eing assessed per the Gov	erning Documents.
Updated 09/24/2019		

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