

**APPLICATION FOR ARCHITECTURAL MODIFICATIONS  
 MUST ATTACH CONTRACTOR'S CERTIFICATE OF LIABILITY INSURANCE  
 (COLI) OR APPLICATION WILL BE RETURNED-SEE SAMPLE ON THE BACK**

Name(s): \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ Tel: \_\_\_\_\_

**GUIDELINES** have been written for the following categories and may be reviewed at the Station Hall Office.  
 Please check all boxes indicating the type of modification requested.

Air Conditioner/Furnace replacement	Irrigation Changes needed for Architectural Modification	Shutters (new or add on) <b>Color Swatch Attached</b>
Antennas/Satellite Dishes	Landscape Edging (Driveway, Flower Beds, Trees, etc.)	Sidewalk-new concrete
Awning for Patio or Deck	Louvers & Roof Vents	Siding-Repair existing
Deck Addition	Mailbox (black only) +/- Posts	Siding-NEW /Replace existing
Deck Handrails- <b>42" Maximum</b>	Oil Tank: In Ground Removal +/- Replacement w Roth Tank	Skylights/Solar Tube/Solar Panels
Doors (exterior & storm/screen)- <b>Color Swatch Attached</b>	Oil Tank: Above Ground Removal	Tree: Removal and Planting New - One (1) only
Driveway-Driveway Extension- <b>12" on each side maximum</b>	Oil to Gas Conversion	Trees: Removal and Planting more than one
Exhaust Fan, Attic/Roof/Kitchen/Bath	Painting (Doors, Shutters, Trim, etc.) <b>Color Swatch Attached</b>	Windows/Sliding Doors
Fireplace Installation/Conversion	Patio- <b>240 Square Feet Maximum</b>	Window Boxes
Furnace Stack Chase	Porch Enclosure (3 Season Room)	<b>EMERGENCY REPAIRS</b>
Generators (home & portable)	Roof- <b>Color Swatch attached</b>	<b>Other-Please explain:</b>
Gutters/Leaders Replacement		

For clarification, please describe your project in detail. Provide information such as: location, size, color, and drawings. Enclose home plot plan when appropriate. Attach additional papers as needed. **All painting requires paint swatch to be attached to this form for doors, shutters, decks, trim & roof.**

Contractor's Name: \_\_\_\_\_

**\*\*\*\*\* PLEASE READ AND INITIAL BELOW \*\*\*\*\***

**NOTE: Any work that may interfere with or damage underground cables, wires, gas lines, irrigation or water main pipes or other utilities must take care to not damage or interrupt those services or infrastructure. It is the homeowner's responsibility to inform their contractor of their full liability in case of any damage to the existing underground lines. Any damage will be the responsibility of the homeowner to pay to repair. Irrigation repairs must be performed by the HOA's contractor. I agree to abide by the above NOTE: (initials)** \_\_\_\_\_

Submit form to Office or place in Storage Cabinet Labeled "Completed Forms Here" in back of Clubhouse

SUBJECT: GUIDELINES: "Application for Architectural Modification"

A completed application form must be filed with the Board of Trustees in form and content as may be required by the Board from time to time, by delivery of the application to Station Hall. All applications to the Board of Trustees shall be subject to the following:

1. It shall be the owner's or occupant's responsibility to assure themselves of the current status of the "Rules and Regulations" that may be in effect at the time of the desired activity.
  2. Manchester Township codes and Certificate of Occupancy apply to Whiting Station property. The Township Building Department requires a copy of this Board's approval letter.
  3. Application and approval process endeavors to:
    - a. Promote the general welfare and safety of the community.
    - b. Provide visual harmony and preservation of the aesthetic values at any given time.
    - c. Avoid interference with existing drainage patterns, utility lines, television cable systems, security systems, irrigation systems or easements and rights of way.
  4. The Board of Trustees responsibilities apply to a broad range of subject matter, including but not necessarily limited to, the following:
    - a. Exterior buildings, additions and alterations.
    - b. Structural interior building additions and alterations.
    - c. Articles designed to be applied to building exteriors such as: signs, window air conditioners, canopies, awnings, attic fans, antennas, and objects of a decorative nature both permanent and non-permanent.
    - d. Objects or articles designed to be installed upon the land or properties such as: patios, porches, plantings, walls, fences, lawn and garden decorations, flagpoles, walkways and driveways.
  5. THERE ARE NO "automatic approvals" UNLESS PROVIDED FOR SPECIFICALLY IN THE GUIDELINES.
- WHITING STATION/BOARD OF TRUSTEES

**ACORD**

**CERTIFICATE OF LIABILITY INSURANCE**

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

**PRODUCER**  
Phoenix-Alliant Insurance Services, Inc.  
2415 E Camelback Rd Ste 950  
Phoenix AZ 85016

**CONTACT**  
NAME: Phoenix-Alliant Insurance Services, Inc.  
PHONE: (602) 955-1000  
FAX: (602) 955-1000  
E-MAIL: phoenix@alliant.com  
ADDRESS: 2415 E Camelback Rd Ste 950  
Phoenix, AZ 85016

**INSURED**  
Contractor Information

**COVERAGES**

**CERTIFICATE NUMBER:** 1981825088  
**REVISION NUMBER:** 1

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN IN EFFECT AS OF THE DATE INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY POLICY DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN MODIFIED BY PAID CLAIMS.

INSURER	TYPE OF INSURANCE	POLICY NUMBER	START DATE	END DATE	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR Contractual liability		10/25/2023	10/25/2024	EACH OCCURRENCE: \$4,500,000 DAMAGE TO RENTED PREMISES (Per occurrence): \$1,000,000 MED EXP (Any one person): \$ EXCLUDED PERSONAL & ADV INJURY: \$4,500,000 GENERAL AGGREGATE: \$5,000,000 PRODUCTS - COMP/OP AGG: \$5,000,000
B	OTHER AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED <input checked="" type="checkbox"/> NON-OWNED <input checked="" type="checkbox"/> HIRED ONLY <input checked="" type="checkbox"/> AUTOS ONLY		10/25/2023	10/25/2024	COMBINED SINGLE LIMIT (Per person): \$2,000,000 BODILY INJURY (Per person): \$ BODILY INJURY (Per accident): \$ PROPERTY DAMAGE (Per accident): \$ EACH OCCURRENCE: \$5,000,000 AGGREGATE: \$5,000,000
F	UMBRELLA/LIAB EXCESS LIAB		10/25/23	10/25/2024	EACH OCCURRENCE: \$5,000,000 AGGREGATE: \$5,000,000
E	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY EXCLUDED OFFICER/OWNER/EXCLUDED? (Mandatory in NJ)		10/25/2023	10/25/2024	PER STATUTE E.L. EACH ACCIDENT: \$1,000,000 E.L. DISEASE - EA EMPLOYEE: \$1,000,000 E.L. DISEASE - POLICY LIMIT: \$1,000,000 Each Auto Event: \$1,000,000 Each Occurrence & Agg: \$5,000,000
D	Excess of Auto Liability (Excess of CGL/Auto/LI)		10/25/2023	10/25/2024	EACH OCCURRENCE: \$1,000,000 AGGREGATE: \$5,000,000

**DESCRIPTION OF OPERATIONS below:**

DESCRIPTION OF POLICY OPERATIONS: VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER**

Whiting Station at Crostwood HOA  
Home Owner's Address

**AUTHORIZED REPRESENTATIVE**

*[Signature]*

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.