

MARINA ARCHITECTURAL CHANGE REQUEST
THIS FORM IS REQUIRED FOR ALL MODIFICATIONS TO BOAT SLIPS
INCLUDING DOCK BOXES, LIFTS & LADDERS

Please complete pages 1 and 2 of this form and submit to
QUEEN'S LANDING BOAT SLIP MARINA, INC
ATTN: Marina Directors
501 Queen's Landing Drive, Chester, MD 21619

Name _____

Slip Number _____ Phone Number _____

Queens Landing Address _____

Narrative and description of the proposed changes or modifications: (Attach drawing of proposed changes or modifications as applicable or provide an aerial view and/or side view, if possible)

Attach a copy of the manufacturers or contractor's material specifications or provide a sample of materials, if available. Any requests to alter the physical structure of the slip require that you submit detailed specifications/drawings from your contractor with this request in order for the request to be considered.

I understand the mailbox unit (SLIP) owner is responsible for all costs, future maintenance, and any damages resulting from or relating to the installation of the proposed request as approved; and understand that responsibilities pass on to all future owners of the slip unit. The proposed changes must meet any and all codes, permits or other requirements deemed necessary by County, State, or other governmental authority. I will be responsible for complying with all licenses, permits, or code provisions as required by law. I understand that the Queen's Landing Boat Slip Unit, Inc. is not responsible for obtaining any permits, licenses, or any other requirements controlled by any governmental agency/authority. I further understand that the changes requested ARE NOT AUTHORIZED until the Marina Board of Directors approves this request and I WILL NOT PROCEED WITH ANY WORK UNTIL I RECEIVE WRITTEN APPROVAL.

Estimated start date _____

Estimated completion date _____

Unit Owner Signature _____

Date _____

RECOMMENDATIONS:

_____ Approved

_____ Denied (see reason(s) for denial below)

_____ Approved subject to the following conditions:

Board Member: _____ Date _____

Board Member: _____ Date _____