



REQUEST FOR ARCHITECTURAL APPROVAL

I. Request Submitter Information

Name	
Address/Unit #	
Phone	
Email	
DATE Submitted:	

II. Requested Change (please check)

NOTE: EACH REQUESTED CHANGE REQUIRES A SEPARATE APPLICATION

Addition		Gazebo/Playhouse	
Porch		Exterior Paint	
Shed		Fence	
Deck/Patio		Landscaping	
Satellite Dish		Hot Tub	

Other change (please specify): _____

III. Specific Description of Improvement, Modification or Change

NOTE: ALL INFORMATION REQUESTED IS REQUIRED FOR APPLICATION TO BE CONSIDERED COMPLETE.

Location on property-specify	
Size/dimensions of modification	
Color	
Materials	
	<i>Note: ALL wood used MUST be pressure treated</i>
Estimated Dates	Starting: _____ Completion: _____
	<i>Starting date must be at least 30 days after submitting application</i>
Contractor Name, Address & Phone (if applicable)	

IV. Required Attachments

NOTE: DOCUMENTS BELOW MUST BE ATTACHED FOR APPLICATION TO BE CONSIDERED COMPLETE. INCOMPLETE APPLICATIONS WILL BE RETURNED AND WILL NOT BE CONSIDERED UNTIL ALL REQUIRED INFORMATION IS PROVIDED TO THE ARC

- Actual COPY of recorded property survey with detailed measurements of location of proposed changes or additions clearly shown.
 - Photos of samples of structure requested (hand drawings NOT acceptable)
 - Detailed plans or drawings including 3 views (front, top, side); must show architectural detail
 - Landscaping details (types of plants, quantities, additions, removals)
 - **PLEASE ALLOW 3-4 weeks for response.**
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- **The Architectural Review Committee reserves the right to request more information to clarify this application**
 - **Installation prior to proper approval is not in accordance with the Association's Covenants, Conditions, and Restrictions**
 - **Approval by the ARC does not in any way guarantee approvals by the City, County, or any other such agencies and all such approvals or permits are the responsibility of the applicant.**
 - **The ARC has 30 days from receipt to respond to your request. The process does not begin until all required documents are received by the ARC.**

For Architectural Control Committee Use Only:

Date ARC recd completed app.			
Date completed app reviewed			
Date homeowner notified of decision			
ARC DECISION	Approved	Conditional Approval	Unable to Approve
REASON for application decision			

Please send all correspondence to:

ARBOR CROFT
Care of Cedar Management Group
P.O. Box 26844
Charlotte, NC 28221
Phone: (704) 644-8808
Fax: (704) 509-2429
Email: support@cedarmanagementgroup.com