

**Summer Glen HOA
REQUEST FOR ARCHITECTURAL APPROVAL**

HOMEOWNER NAME: _____

ADDRESS: _____

LOT #: _____ PHONE #s: Daytime: _____

EMAIL ADDRESS: _____

DATE SUBMITTED: _____

**The Architectural Review Committee has 30 days to review your request.
Please wait for written approval before starting any projects.**

TYPE OF MODIFICATION:

_____**ADDITION** _____**FENCE** _____**EXTERIOR PAINTING** _____**DECK/PATIO** _____**OUTBUILDING**
_____**PORCH** _____**OTHER:** _____
_____**LANDSCAPE MODIFICATION (DESCRIBE)** _____

IMPORTANT: PLEASE ATTACH A DETAILED DESCRIPTION OF IMPROVEMENTS/MODIFICATIONS, INCLUDING THE FOLLOWING INFORMATION, IF APPLICABLE, AS WELL AS A PLAT MAP SHOWING LOCATION OF MODIFICATION:

- | | |
|---|--|
| 1. Location | 7. Plans/Drawings/Photo/Brochure |
| 2. Size | 8. Roof Design |
| 3. Color | 9. Exterior Finish |
| 4. Material | 10. Dimensions |
| 5. Contractor | 11. Utilities |
| 6. Copy of Property Plat Map, with Proposed changes/ treatment Additions shown | 12. Types of plants, quantities, addition or removal, existing or new plant bed, edge |

WHAT IS YOUR ESTIMATED START DATE?: _____

WHAT IS YOUR ESTIMATED COMPLETION DATE?: _____

THE COMMITTEE RESERVES THE RIGHT TO REQUEST MORE INFORMATION TO CLARIFY THE REQUEST. REQUESTS FOR MULTIPLE CHANGES SHOULD BE SUBMITTED SEPARATELY.

**ALL APPLICATIONS SHOULD BE MAILED TO: Summer Glen HOA
P O Box 431
Summerville, SC 29484**

****NOTE: Homeowner is responsible to assure all municipal approvals are received and that all municipal and HOA Covenants & Restrictions are adhered to. Homeowner is responsible for any drainage areas affected by any modifications.**

Page 1 of 3 (pg 2 is for internal use and will be forwarded to the architectural committee for their response along with this completed form, pg 3 lists guidelines for filling out the form)

ARCHITECTURAL COMMITTEE RESPONSE FORM

Date Received: _____ Complete Information Received: ___ Yes ___ No

If No, Additional Information Required _____

Date Notified Homeowner need additional information _____

Date Received Complete Information _____

Date: _____

Approved _____ Approved With Revisions _____ Not Approved _____

Revisions Required:

Reason for Denial:

ARC Representative _____

Notification to homeowner forwarded on: _____ by _____

Page 2 of 3 (pg 1 being the request completed by the homeowner)

Guidelines for Submitting an Architectural Request

In order to submit a request for architectural changes you must adhere to the following guidelines.

1. Fill out the attached “**Request for Architectural Approval Form.**” Please include all the requested information including but not limited to; location, size, color, building material, exterior finish, dimensions, utilities, and types of plants quantities to be used.

Include with your request a copy of your **Plat Map or Lot Survey.** You should have received this document at your closing. If you do not have a plat map you will need to contact your county Tax Department. Please draw the location of the proposed item directly on the map.

2. You must also include a **brochure, photo, picture or drawing** of what the project will look like when it is completed.

Your request cannot be processed without all of the above information included. **Incomplete requests will be returned to the homeowner for completion.**

IT MAY TKE 30 DAYS TO PROCESS AN ARCHITECTURAL REQUEST AND RETURN A RESPONSE TO THE HOMEOWNER.

NO PROJECT CAN BEGIN WITHOUT WRITTEN APPROVAL FROM THE ARCHITECTURAL COMMITTEE.