



SEND FORMS TO:

Planter's Row Home Owners Association, Inc
C/O Cedar Management Company
PO Box 26844
Charlotte, NC 28221

Email: ARC@mycmg.com

ARCHITECTURAL REQUEST FORM

Owner Name: _____ Lot No: _____

Address: _____

Phone #: (home) _____ (work) _____ (cell) _____

Date Submitted: _____ Est. Date of Project Completion: _____

CATEGORY OF IMPROVEMENT/ALTERATION

Check one or more categories:

<input type="checkbox"/> Landscaping	<input type="checkbox"/> Play Equipment	<input type="checkbox"/> Windows	<input type="checkbox"/> URGENT
<input type="checkbox"/> Structure	<input type="checkbox"/> Sun/Screened Room	<input type="checkbox"/> Doors	(leaking roof, damaged tree etc.)
<input type="checkbox"/> Fence	<input type="checkbox"/> Tree Removal	<input type="checkbox"/> Roof/Shingles	<input type="checkbox"/> RESUBMITTED
			(with requested changes)
<input type="checkbox"/> Other (Please Specify) _____			

Information ACC requires to proceed with your request:

PLEASE NOTE: Failure to provide all required information will result in the return of your request. Please refer to the ACC Manual/Covenants regarding your request.

Site Plan Available at <http://www.gcgis.org/apps/greenvillejs/> Enter your details in the parcel search & print the aerial view of your lot

Indicate location of improvement/alteration on site plan – (Must be included for review)

Grading/landscaping plan (if applicable)

Include photo, brochure or sketch of improvement

Material listing (including colors etc.)

Contractor/Installer quote and any design/installation notes

FENCE INSTALLATION: Check all that apply PLEASE NOTE: Vinyl Fences and Metal Fences are NOT permitted (2014 ACC manual page 17, 2a).

Fence Height: 4' 6' Fence Style: Privacy Picket Shadow Box

Fence Design: Scalloped Upward Straight Top

Materials: Wood Composite (composite color: _____)

DETACHED BUILDING INSTALLATION:

May not exceed 1 ½ story in height

Shall be constructed of materials matching or complementing main dwelling on lot

Shall be located in back yard

FOR OFFICAL USE ONLY

APPROVED: _____ ACC Member / _____ Date / Date Sent to ACC: _____

DENIED: _____ ACC Member / _____ Date / Date Sent to H/O: _____

Reason for denial/approval condition: _____

ACC response to inquiry is required within 30 days. Applications may be emailed to ARC@mycmg.com

All complete requests are sent to ACC on day of receipt – Notice of approval is prepared upon receipt of ACC decision.

You are advised not to sign a contract or pay a deposit until your application has been approved.