

SARDIS PLANTATION REQUEST FOR ARCHITECTURAL APPROVAL

NAME: _____ ADDRESS: _____

DATE: _____ PHONE: _____

EMAIL (OPTIONAL): _____

Please submit one (1) complete packet to Bernie Bentley, 425 Clairview Lane, Matthews, NC, 28105 or email to Bernie@sardisplantation.com A copy will be returned to you after FINAL APPROVAL. The committee reserves the right to request additional information to clarify the request. Requests for multiple changes must be submitted separately (i.e. one request each for deck, fence, painting, replacing windows, etc.) You will receive a response from the Architectural Control Committee within 30 days of submitting a request.

Architectural Control Committee approval is authorization to begin project. Final approval is given after project has been completed and inspection confirms the modification is consistent with this request.

TYPE OF MODIFICATION:

- | | | | |
|--|--|---|---------------------------------------|
| <input type="checkbox"/> Fence | <input type="checkbox"/> Pool | <input type="checkbox"/> Satellite Dish | <input type="checkbox"/> Roof Singles |
| <input type="checkbox"/> Porch | <input type="checkbox"/> Deck/Patio | <input type="checkbox"/> Utility Building | <input type="checkbox"/> Garage Door |
| <input type="checkbox"/> Home Addition | <input type="checkbox"/> Exterior Painting | | |
| <input type="checkbox"/> Other (Explain) _____ | | | |

On a separate page, please attach a detailed description of the project, including the following:

- | | |
|-------------------------------------|--|
| 1. Location | 4. Materials |
| 2. Size | 5. Copy of property parcel with proposed changes shown |
| 3. Color(s) [Submit Samples] | 6. Drawing/sketch of additions/changes to house/lot |
| 7. Contractor | |

Estimated Start Date: _____ Estimated Completion Date: _____

Upon completion please notify Bernie Bentley @ 704-845-8612 to obtain FINAL APPROVAL.

FOR ARCHITECTURAL CONTROL COMMITTEE USE

Received By: _____ Date: _____

Approved/
Not Approved: _____

Date : _____

Homeowner phone notification: _____ Date: _____

Homeowner's notification that modification is complete _____ Receipt _____

Final Approval (Post Modification Confirmation)

- 1. Approved: _____
- 2. Not Approved: _____

- Approval _____
- Notify HO _____
- Completed _____
- Closed _____