

Southridge Homeowners Association of Charlotte, Inc.
Architectural Review Application

Form One: Application for Architectural Review

All information requested in the following application must be accurately completed by the property owner(s). Once you have submitted your application with the appropriate documents, you must notify the Committee in writing about any changes. These changes must be noted and updated in the appropriate place on this application. If your plan is approved, you will be notified of the approval in writing.

Lot Number:		Street Address:	
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Property Owner Information			
Name:		Mailing Address: (City/State/Zip)	
Phone Number(s):		E-mail Address:	

Please check one of the following to identify your current project:

☐ New Addition ☐ Improvement/Modification

Describe your project in detail:

Please provide a drawing and layout for any improvements, additions or landscaping changes to your property on a copy of your lot survey or plat map. You must provide the exact location of the project on your property, dimensions and measurements to your property lines. You may include your plans as an attachment if necessary. Please Note: Applications submitted without the required information, plat map/survey or exhibits will be rejected without approval.

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Provide Details of Colors and Materials to be used. These should be very specific such as wood, vinyl, metal, concrete, etc.; paint or material color, etc. for each location or specific use (roofing, siding, fencing, etc.) Please submit a photograph showing the design, material and color. The ACC may request a sample of the materials or paint chip.

<u>Location/Use</u>	<u>Type/Color of Material</u>

APPLICATION FEE

A plan review fee of [] \$50.00 is enclosed with this application.

Completed applications can be delivered to *Southridge Homeowners Association of Charlotte, Inc., c/o Association Management Solutions (AMS) at 248 Latitude Lane, Suite 102, Lake Wylie, SC 29710, or mailed to AMS at P.O. Box 38809, Charlotte, NC 28278. Applications can also be emailed to ams@amshoa.com.*

Please acknowledge your agreement with the following statements by signing and dating the application:

I, as the property owner of the property listed in this application, agree that the improvements will be constructed in accordance with plans and specifications which have been approved by the **Southridge Homeowners Association of Charlotte, Inc. Architectural Control Committee.**

I further acknowledge and agree that:

1. I have read and understand the Protective Covenants and Guidelines applicable to the Architectural Standards and agree to follow and comply with said Covenants and Guidelines.
2. I understand that I am responsible for completing the project as described by the drawings, specifications and materials approved in writing by the ACC.
3. I understand that the ACC has 30 days from the date this application and other requested materials are received by the ACC to respond and that supporting documentation detailing construction or improvements may be required. I further understand that the ACC may request additional documentation which must be submitted in a timely manner.
4. I understand that the ACC may reject this application if my project does not meet the Architectural Standards or if appropriate documentation and information requested is not submitted.

Date of Application and Agreement _____

By: Property Owner's Signature: _____

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Form Two: Architectural Review Request for Changes to Plans

Lot Number:		Street Address:	
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**Type and Description of Proposed Change: (Attach
Diagram, Material List and photograph if Applicable)**

Submitted By: _____
Property Owner

Date Submitted: _____

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For Architectural Control Committee Use Only:

Application:

Date Application Received by ACC:	
Received By:	
Design Review Fee Amount Submitted:	\$
Check Number:	

Status:

Application Under Review:			
Additional Information Requested from Applicant:		Date of Request:	
Additional Information Received:		Date Received:	
Final Review Completed:		Date Completed:	

Additional Details Requested:

Committee Recommendation:

Plans Approved:	
Plans Rejected:	
Written Notification Sent:	
Date:	

ACC Representative: _____

Signature

Position: _____