

## ARCHITECTURAL CHANGE (ACC) REQUEST FORM

Complete all the fields below

HOA Name: **Browns Crossing HOA**

Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Proposed Start Date: \_\_\_\_\_ Proposed Finish Date: \_\_\_\_\_

### Project Type: (Please check all applicable categories)

- |   |   |   |                                 |
|---|---|---|---------------------------------|
| <input type="checkbox"/> Landscape      | <input type="checkbox"/> Arbor          | <input type="checkbox"/> Swimming Pool            | <input type="checkbox"/> Deck   |
| <input type="checkbox"/> Tree Removal   | <input type="checkbox"/> Play Equipment | <input type="checkbox"/> Gazebo                   | <input type="checkbox"/> Fence* |
| <input type="checkbox"/> Paint House    | <input type="checkbox"/> Room Addition  | <input type="checkbox"/> Recreational Equipment   | <input type="checkbox"/> Other  |
| <input type="checkbox"/> Retaining Wall | <input type="checkbox"/> Porch/Patio    | <input type="checkbox"/> Enclosure of Porch/Patio |                                 |

Description of work: \_\_\_\_\_

Is this request in response to a violation letter we sent you? Yes ☐ No ☐

### \* If this is a fence request, please answer the following:

What is the height of the proposed fence? \_\_\_\_\_ Material Type? \_\_\_\_\_

What is the finish of the proposed fence? \_\_\_\_\_ (stain color, natural, unfinished etc.)

Will the fence begin and end on the back corners of your home? Yes ☐ No ☐

If no, please explain: \_\_\_\_\_

### Please attach the following:

- ☐ Detailed written description of the proposed modification
- ☐ Attach supporting materials such as drawings, plans, paint samples, or brochures with photographs.

Homeowners are responsible for any building permits that may be required, building code compliance, survey of property lines, and arranging for required inspections and approvals. The homeowner hereby grants permission to the ACC Committee to enter the property and make reasonable observation and inspections associated with the modification request and completion of the project.

Homeowner Signature: \_\_\_\_\_

### ACC Committee Use

Date Received by Mgmt: \_\_\_\_\_ Date Sent to the ACC: \_\_\_\_\_

☐ Approved ☐ Approved w/Stipulations ☐ Denied ☐ Denied – Insufficient Information

Notification Via: ☐ US MAIL ☐ EMAIL ☐ FAX

Comments: \_\_\_\_\_

### Submit this form using one of the following options: Online:

Complete this form online at

Submit Form to:

**Submit Form**