Form One: Application for Architectural Review

<u>All information requested</u> 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:		
Property Ow	ner Information	1	
Name:		Mailing Address: (City/State/Zip)	
Phone Number(s):		E-mail Address:	
Project Details:			
Proposed Architectur	ral Design & Style:		
	ete, etc.; paint or mat		should be <u>very specific</u> such as reach location or specific use
Details:			
Square Footage Total (Bonus, 2 nd , basement) Number of Stories	Main,		
Sq Ft per Floor			
Sq Ft per Floor Exterior Color/Materia	1		
Roofing Material/Colo			
Secondary Roofing	1		
Material/Color Roof Pitch on Main Pa	rt		
Window/Door Types/C			
Garage Door Design/S			

Landscaping and Outdoor Features:						
Landscape Plan (include details such as trees, shrubs, and hardscape elements)						
Fence and/or Retaining Walls (if applicable):						
Construction Timeline:						
construction Timemet						
Contractors/Builders involved:						
Required Documentation:						

- Site Plan displaying proposed building location and setbacks.
- House plans to scale, with elevation drawings.

APPLICATION FEE

A plan review fee of [] \$200.00 is enclosed with this application. Please make checks payable to MJ Rooster Investments, LLC. Please mail to 2121 Ebenezer Road Suite 101 Rock Hill, S.C. 29732.

Please email application to southernpinelake@gmail.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 **Southern Pine Property Owners Association 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:	

Form Two: Architectural Review Request for Changes to Plans

Lot Number:	Street Address:	
Type and Descrip	tion of Proposed Change: (Attach	
Diagram, Materia	l List and photograph if Applicable)	
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Submitted Dec		
Submitted By:	Property Owner	
Date Submitted:		

For Architectural Control Committee Use Only:

For Architectural Control Com	imittee (osconiy.	
Application:			
Date Application Received by A	ACC:		
Receive	d By:		
Design Review Fee An	ount		
Subm	itted:	5	
Check Nun	nber:		
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:	Sigr	nature	
Position:			