

Application for Architectural Review

Revised January 2020

Homeowner Name (s): _____

Street Address: _____

Primary Phone Number: _____

Primary Email Address: _____

Estimated Start Date: __/__/__

Est. Completion Date: __/__/__

- Please note that the Architectural Request Committee has **THIRTY (30) DAYS** from the date of submittal to review your request. Incomplete submissions may delay this timeframe and will be returned to homeowner(s) for completion.
- No work may begin until Approval is received from the Architectural Request Committee.
- The Committee reserves the right to request more information to clarify the submission.
- Requests for multiple changes or requests that have changed prior to the start of your project should be submitted separately.
- Please review current Regulations of your community prior to submission as the submission will be returned without review if it directly conflicts with the Governing Documents.

Homeowner (s) are seeking approval for the following modification (s) to the property listed above. (Please check one of the options below).

Landscaping Addition/Removal/ Change

Fence

Exterior Painting (If color change ONLY)

Porch

Deck/Patio

Addition to Home/ Change to Exterior Walls

Sheds/ Outbuildings

Other: _____

(If the project does not fall within one of the above categories)

The following supporting information is required to be attached to this application. Please use the following checklist for a complete submission. (Please submit the below as applicable to your project; any questions, please contact Paradigm's Office.)

- _____ 1. **Letter** of intent explaining the project.
- _____ 2. A **copy** of the lot layout showing house, property lines and easement lines. (A google maps satellite /earth photo is acceptable)
- _____ 3. **Sketch** on the lot layout indicating where the modification will be placed. Measurements of the modification to be noted as well as measurements from the modification to property lines. The sketch only needs to show information relative to the property you are currently requesting and does not need to be to scale; however, all relevant dimensions should be indicated.
- _____ 4. A description of the **materials** and **colors** to be used in construction of the modification.
- _____ 5. A **rendering** of what the project will look like when completed (i.e. picture of a fence from the manufacturer).
- _____ 6. A **photo** of the existing area where the project will take place.

Homeowner(s) are responsible for all **required municipal approvals** and understands that the Architectural Review Committee may request or require approved permits when applicable on major structural changes.

The Homeowner(s) listed requesting approval for an exterior medication acknowledge that no work may begin until approval has been issued by the Architectural Committee and that the Committee has thirty (30) days from the date of submission for consideration. If approval is requested sooner, please notify the office and the Committee will make every effort to review by your start-date in the order of which it was received.

If the work begins prior to Approval or is not completed within ONE YEAR of start date, a fine may be incurred to your account within the Association. If your project time needs an extension, the Homeowner MUST contact the Office to request a change to the submission. Homeowner(s) acknowledge that incomplete requests will be returned and not considered until all items are received together.

Please sign here to accept the above terms and confirm all supporting items are attached.

Signature of HOMEOWNER(s):

_____ **Date:** _____

_____ **Date:** _____