

# Architectural Form

(Print, complete and submit)

Note: Please submit **two copies** of your request.

## Hampton Place Property Owners' Association, Inc.

### Application for Approval of Exterior Modification

Date Request Received:

\_\_\_\_\_

Name \_\_\_\_\_ Lot Number \_\_\_\_\_

Property Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone :

(cell) \_\_\_\_\_

(work) \_\_\_\_\_

(fax) \_\_\_\_\_

***I request design approval and grant permission to the Hampton Place Property Owners Association representatives to enter the property to consider the request and to inspect during installation and upon completion.***

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Type of Modification:**

**Addition** \_\_\_\_\_ **Porch** \_\_\_\_\_ **Exterior Painting** \_\_\_\_\_

**Deck/Patio** \_\_\_\_\_ **Fence** \_\_\_\_\_ **Pool** \_\_\_\_\_

**Landscape Modification** \_\_\_\_\_ **Other** \_\_\_\_\_

**Description**

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**Attach details of improvements/modifications including the following information, if applicable:**

1. Location (include property boundaries, drives, walks, etc. and existing trees larger than 6" diameter)
2. Size
3. Color (include paint chips, etc.)
4. Material
5. Contractor
6. Copy of property survey (given to you at closing) with proposed changes/additions shown
7. Plans or drawings
8. Landscape Details (types of plants, quantities, additions or removal, etc.)

**Estimated Starting Date** \_\_\_\_\_

**Completion Date** \_\_\_\_\_

**The Architectural Review Committee reserves the right to request more information to clarify this request. Requests for multiple changes should be submitted separately.**

**Please allow thirty (30) days for processing and approval of requests.**

**Installation prior to proper approval may subject the owner to penalties and/or fines.**

**Please provide all forms to Cedar Management Group**

**PO BOX 26844**  
**Charlotte, NC 28221**

**Other information or data pertinent to requested modification**

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**Design approval:**

Yes \_\_\_\_\_ Conditional approval \_\_\_\_\_ No \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_

**Remarks/Special Comments:**

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