

Lauren Pines HOA

Lauren Pines Homeowners Association

ARCHITECTURAL REVIEW REQUEST

Date Submitted: _____

Date Received: _____

The Architectural Review Committee has 30 days to review your request and advise you of their decision. Please plan your project start date accordingly. If you should start without approval, legal action may be taken by the HOA without notice.

To insure a quick and complete response to your request;

- Fully complete all requested information on this request.
- Attach additional exhibits/information such as lot survey, plan view or elevation drawings, complete description of material such as a photograph of proposed item.
- Pay \$25.00 ARC fee in the owners portal.

NOTE: You, the homeowner, are responsible for securing any necessary building permits or approvals from York County. Any improvements made within a utility easement on your property are subject to relocation or removal, should any future utility maintenance work be required by either York County, or other utility company. The cost of restoration, should the relocation or removal be necessary, is at the homeowner's expense. Restorations must be submitted to the ARC for approval.

Request submitted by: _____

Street Address: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

PLEASE check the following applicable to your project:

Modifications to: ___ Home ___ Fence ___ Patio ___ Landscaping ___ (Other) _____
Property Additions: ___ Fence ___ Patio ___ Deck ___ Swings/Playsets ___ Landscaping
 ___ (Other) _____

PROJECT DESCRIPTION: (Include size, materials being used, and colors) _____

Attachments: Any illustrations must include dimensions of modification/addition, including heights (if applicable). Survey should also note distance from modification/addition to house and side and rear lot set back lines.

Survey Required: ___ Elevation Dwgs. Req.: ___ Illustrations Req.: ___ Color Samples Req.: ___

Estimated Start Date: _____ Estimated Completion Date: _____

Homeowner is required to contact New Town HOA Management, LLC when project is complete. The Lauren Pines HOA Board will make the final decision inspection.

Homeowner Signature: _____ Date Signed: _____

By submitting this request, I agree to perform the work described strictly in accordance with the approved plans and specifications.

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FOR ARC USE

Date Received: _____

Complete Information Received: ___ Yes ___ No

If No, Additional Information Required:

Date Notified Homeowner need addition information: _____

Date Received Complete Information: _____

Date of Final Inspection by the Lauren Pines Board of Directors _____

Date: _____

Approved: ___

Approved with Revisions: ___

Not Approved: ___

Revisions Required:

Reasons for Denial:

ARC Representative: _____

Notification to homeowner forwarded on: _____ by _____

**Return To: New Town HOA Management, LLC
1548 Ebenezer Road
Rock Hill, SC 29732
info@newtownhoa.com**