

## REQUEST FOR ARCHITECTURAL APPROVAL

### I. Request Submitter Information

Name	
Address/Unit #	
Phone	
Email	
DATE Submitted:	

### II. Requested Change (please check)

**NOTE: EACH REQUESTED CHANGE REQUIRES A SEPARATE APPLICATION**

Driveway Extension		Gazebo/Playhouse	
Porch		Exterior Paint	
Shed		Fence	
Deck/Patio		Landscaping	
Satellite Dish		Tree Removal	

Other change (please specify): \_\_\_\_\_

### III. Specific Description of Improvement, Modification or Change

**NOTE: ALL INFORMATION REQUESTED IS REQUIRED FOR APPLICATION TO BE CONSIDERED.**

Location on property-specify	
Size/dimensions of modification	
Color	
Materials	<b>Note: ALL wood used MUST be pressure treated</b>
Estimated Dates	Starting: _____ Completion: _____ <b>Starting date MUST be at least 30 days after submitting application</b>
Contractor Name, Address & Phone (if applicable)	

**Please note:**

- **The ARC process does not begin until all required documents are received by your Board of Directors.**
- **The Architectural Review Committee reserves the right to request more information to clarify this application. If more information is requested, the turn around time restarts.**
- **Installation prior to proper approval is a violation of the Association's Codes, Covenants, and Restrictions and may result in a violation letter and possible fines.**
- **Approval by the ARC does not in any way guarantee approvals by the City, County, or any other such agencies and all such approvals or permits are the responsibility of the applicant.**

**Please include ALL required documents:**

- All pages of the request form
- Detailed description of improvement including: location, dimensions, color, and materials
- Contractor name, if applicable
- Sample or photographs of materials: siding, paint, shingle etc
- Photographs of what currently exists
- Photos or drawings of proposed structure/improvement
- Landscape plan, if applicable, including: names/photographs of plants and quantities
- ACTUAL property survey with the location of the improvement clearly marked - no GIS/Google Maps

**Please send all correspondence to:**

Association Name  
**Cedar Management Group**  
P.O. Box 26844  
Charlotte, NC 28221  
Phone: (704) 644-8808  
Fax: (704) 509-2429  
Email: [arc@mycmg.com](mailto:arc@mycmg.com)

*For Architectural Control Committee Use Only:*

Date ARC recd completed app.	
Date completed app reviewed	
Date homeowner notified of decision	
ARC DECISION	Approved    Conditional Approval    Unable to Approve
REASON for application decision	