Sunset Oaks Homeowners Association, Inc. Architectural Change Request Form

Please submit this application and any attachments to William Douglas Property Management Phone (919) 459-1860 Fax (919) 459-1861

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Homeowner's Name		
Property Address		
Lot # (If known) Homeowner's Phone # (H)		
(M)		
(**)		
<u>Re</u>	quest Statement and I	Agreement
approval by the Sunset Oak grant permission to the Ass to, during, and upon compl and/or Architectural Comm Sunset Oaks Association Co	inc. Covenants and Archites Association for the following for the following for the project. If Subtree determines this project and/or Architect	ectural Guidelines. I request owing described project only. I berty and inspect the project prior inset Oaks Homeowners Association ect in any way violates the existing ural Guidelines or is not completed be made fully compliant with the
Homeo	wner Signature	Date
	Neighbor Acknowled	<u>gment</u>
process. Therefore, for each their name, address and te	h neighbor who is adjace lephone number and mak below signify that neighb	mmon courtesy in the approval nt to your property, please provide se a reasonable attempt to obtain ors are aware of your plans, and do
Name	Address	Phone
		

Describe proposed changes or additions:

To speed up the process the proposed plan should include sizes, heights, description of materials, etc. Attach a copy of your plot plan, if possible, and indicate location of proposed exterior design change on lot in relation to house and other existing structures. Also attach any sketches, specifications, pictures, paint charts, or the like that will assist in reviewing this application. Please note that potential screening or site restrictions, noise levels, and other privacy intrusions will be considered in review & approval of any mechanical equipment, i.e. trees restricting views and pool pumps.						
ESTIMATE	D CONSTRU	CTION DATES: Start Date	Finish _			
Please mail force its co	•	contractor adheres to you	ur schedule, since the assoc	ciation can		
Other Inf	ormation R	egarding Project Requ	est:			
<u>Special C</u>	onditions fo	or Approval:				
Approved		Disapproved	Conditional Approva	al		
			(See abov	re)		
Signature:			Date:			
		s Homeowners Association itectural Committee	n, Inc. Officer			