

Belleclave Community Association, Inc.
Architectural Review Application - Color Modifications

DATE OF APPLICATION _____

OWNER _____

Address _____

City, State,

Zip _____

Home Phone _____ Work Phone _____ Mobile Phone _____

Email _____

WRITTEN DESCRIPTION OF MODIFICATIONS

Required information is outlined on the following page. The application, fee and required documents must be completed and submitted by the Owner or agent before the commencement of any construction activity or alteration of any type, including landscaping. Please submit to:

Robin Brackett Architecture PC, 808-C Lady Street, Columbia, South Carolina 29201
ArchitectureRB@aol.com
803-233-7780 office

You will be notified of the results within three (3) weeks of the date of submittal. If changes are required, one set of plans along with a letter outlining any required changes will be returned to you. The second set of plans will be retained by the ARB. Any required changes must be incorporated into the plans prior to being re-submitted.

If there are no changes required, the Application will be signed and returned to you as final approval for construction.

Date Received

Status

Date Reviewed

For the ARB

Belleclave Community Association, Inc.
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SUBMITTAL CHECKLIST

_____ \$100.00 DESIGN REVIEW FEE, made payable to Robin Brackett Architecture PC

_____ CERTIFICATE OF COMPLIANCE

_____ EXTERIOR COLORS: Provide color samples or photographs of the existing house and the proposed new colors.

_____ **APPROVED** _____ **DISAPPROVED**

Belleclave Community Association, Inc.
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CERTIFICATE OF COMPLIANCE

The Belleclave Community Association, Inc. expects all Owners to willingly comply with all requirements outlined in the ARB Guidelines for Design and Construction. Failure to comply may result in substantial delays or stop work, in addition to penalties. This form should be submitted once a contractor has been selected. The Owner or Agent may submit the form to:

Robin Brackett Architecture PC
808-C Lady Street
Columbia, South Carolina 29201
ArchitectureRB@aol.com

The UNDERSIGNED does CERTIFY to The Belleclave Community Association, Inc. that the Color Modifications proposed for the house located at:

will be completed in compliance with the recorded covenants and the final plans approved by the ARB on _____, 20____.

OWNER: _____
Signature

WITNESS: _____
Signature

CONTRACTOR IF APPLICABLE: _____
Signature

WITNESS: _____
Signature

Date Received

For the ARB