



Stephens Grove Architectural Review Committee
P.O. Box 11906
Charlotte, NC 28220

REQUEST FOR ARCHITECTURAL APPROVAL

NAME: _____ DATE: _____

ADDRESS: _____

LOT #: _____ PHONE NUMBERS: _____ WORK: _____
HOME: _____

TYPE OF MODIFICATION:

_____ ADDITION _____ FENCE _____ EXTERIOR PAINTING
_____ DECK _____ PORCH
_____ LANDSCAPE MODIFICATION (DESCRIBE) _____

IMPORTANT: Please attach a detailed description of improvements/modifications, including the following information, if applicable.

- | | |
|--|--|
| 1. Location | 8. Roof Design |
| 2. Size | 9. Exterior Finish |
| 3. Color | 10. Dimensions |
| 4. Material | 11. Utilities |
| 5. Contractor | 12. Types of plants, quantities, addition or removal, existing or new planting bed, edge treatment |
| 6. Copy of Property Survey with proposed changes/additions shown | |
| 7. Plans/drawings | |

WHAT IS YOUR ESTIMATED START DATE? _____
WHAT IS YOUR ESTIMATED COMPLETION DATE? _____

THE COMMITTEE RESERVES THE RIGHT TO REQUEST MORE INFORMATION TO CLARIFY THIS REQUEST. ***THE ARCHITECTURAL REVIEW COMMITTEE HAS THIRTY DAYS TO RESPOND.*** REQUESTS FOR MULTIPLE CHANGES SHOULD BE SUBMITTED SEPARATELY.

PLEASE SUBMIT THREE COPIES OF EACH REQUEST TO THE ADDRESS LISTED ABOVE. (One Copy will be returned to you for your records.)

APPROVED BY: _____

DATE APPROVED: _____