

Sachem's Head Homeowners' Association

Architectural Review Request

HOMEOWNER NAME: _____

PHONE NUMBER: _____

PROPERTY ADDRESS: _____

EMAIL: _____

REQUEST DATE: ____/____/____

WORK START DATE: ____/____/____ WORK END DATE: ____/____/____

DESCRIPTION OF CHANGE: _____

Attach additional pages if necessary. The Architectural Review Committee (ARC) needs as much as information as possible, such as brand names and color of paint to be used. Provide color chips if available. If you are requesting approval of an extension to your deck or construction of an outbuilding, please provide a copy of your Plat with a scaled sketch of the addition.

THIS FORM MUST BE SUBMITTED AT LEAST 30 DAYS BEFORE COMMENCING WORK. WORK MUST BE COMPLETE WITHIN 180 DAYS OF THE BELOW APPROVAL DATE.

The Homeowner is responsible for obtaining all required permits and is responsible for conforming to all State and local building codes as they apply to the project. Sachems Head Homeowners Association assumes no liability for failure to comply with above.

ARC USE ONLY

ARC Reviewer Name: _____ Date: ____/____/____

ARC Reviewer Name: _____ Date: ____/____/____

ARC Reviewer Name: _____ Date: ____/____/____

Board of Directors Name: _____ Title: _____

Director Signature: _____ Date: ____/____/____

Approved: Denied:

Comments: _____

