



## Falcon Point of Heath Architectural Review Committee Submittal & Modification Application

Applicant(s): \_\_\_\_\_ Application Date: \_\_\_\_\_

Lot#: \_\_\_\_\_ Address: \_\_\_\_\_

Mailing Address (If Different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone (optional): (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_ Contact Email: \_\_\_\_\_

Select Approval Type: Please select the type of approval you are seeking. Include drawings or attachments as needed to describe your request in detail.

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> New Home Construction              | <input type="checkbox"/> Patios & Decks             | <input type="checkbox"/> Home Additions      |
| <input type="checkbox"/> Yard Structures                    | <input type="checkbox"/> Exterior Color & Materials | <input type="checkbox"/> Mailboxes           |
| <input type="checkbox"/> Driveway And Paving                | <input type="checkbox"/> Fences and Walls           | <input type="checkbox"/> Pools & Landscaping |
| <input type="checkbox"/> Other Changes & Renovations: _____ |   |  |

**Please Note:** It is the responsibility of the owner and/or contractor to determine whether or not the proposed changes and improvements are safe and in compliance with local building and fire codes, structurally, electrically, or otherwise, and are completed using sound and accepted building practices. Falcon Point HOA, the Architectural Review Committee, Officers, and all others associated with the Falcon Point HOA shall not be held liable in damages or otherwise due to the approval or non-approval of any requested change or improvement.

I certify that the included information is a reasonable representation of the improvements to be made, and that work will be completed in accordance with the approval document. I furthermore certify that all work will conform to applicable codes, covenants, and standards. Any changes or deviations will be submitted to the Architectural Review Committee (ARC) prior to construction of changes. I understand that construction is not to begin until approval is received from the ARC. I also grant permission to the ARC to enter the property to make inspections as they deem necessary.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approval Status:

- Approved     Conditional Approval     Denied     Additional Information Required

ARC Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ARC Member Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Approval Stamp: