



ARCHITECTURAL REQUEST

Heritage Spring Homeowner's Association



Name: _____ Date: _____

Address: _____

Daytime Phone: _____ Evening Phone: _____

E-mail Address: _____

*** DO NOT START YOUR PROJECT WITHOUT HOA APPROVAL ***

In order for your application to be reviewed, you must submit all required information for your application to be deemed complete. Please note failure to provide this information may cause a delay in the review process. Provide a detailed description below:

Please mark the box with an "X" beside your proposed project type.

The numbers in parentheses correspond to the below required applicable attachments needed for each project.

<input type="checkbox"/> New or Converted Deck/Screened Porch, 3or4 Season Room (1,2,3,4,5)	<input type="checkbox"/> Exterior Color Paint Change (3,4)
<input type="checkbox"/> Patio, Pergola, Fire Pit, etc. (1,2,3,4,5)	<input type="checkbox"/> Other
<input type="checkbox"/> Landscaping, Drainage, Grading (1,2,5)	

Each project must be accompanied with the following applicable additional information

The below numbers correspond to the above numbers in parentheses.

1. Plat Plan with location of project shown, drawn to scale indicating all dimensions (length, width, height, square footage) and distance to ALL property lines.
2. Materials List. For landscaping requests, include list of plants to be used with locations shown and size of plant type at maturity.
3. Indicate color(s) and include paint/stain jpeg's and note if it will match the existing home.
4. Provide photos of proposed project area.
5. Landscape Plan, Drainage Plan and/or Grading Plan as applicable.
6. Existing color repaint does NOT require filling an AR Request. Any **CHANGE** in exterior color requires ARC approval. In addition to required photos, an actual color card (not a jpeg) is required. A test paint section (6'x6') may be required for color change approval.

****PLAT PLAN, RENDERING, SIGNATURE AND INITIALS REQUIRED ON ALL APPLICATIONS ****

REQUIRED: All directly adjoined neighbors' signatures for any exterior modification.

(This includes all neighbors bordering both side property lines and neighbors bordering the rear property line)

My signature acknowledges I am aware of my neighbor's proposed improvement(s)/addition(s).

My signature is not an approval, if I have any concerns or questions about the proposed project I will direct them to the Architectural Committee.

NAME	SIGNATURE	ADDRESS

I understand that this application will be reviewed by the Board of Directors (or its Architectural Committee). I further understand that the Board of Directors (or its Architectural Committee) has the authority to approve, approve with conditions or deny this request and that there is no appeal other than resubmission of a modified request. I further understand that the placement and design of my improvement must meet the architectural guidelines, regardless of my submission or errant approval of such submission. A variance from standards must be noted by the committee in the comments section below. Please note the Board/Committee is allowed up to 45 days to render a decision from the date the complete application is received.

_____ Homeowners Signature _____ Date

If Applicable,
Initial Here

Submission without an Official/Certified Plat Map/Survey:
I hereby certify that my mortgage company did not require a survey.

Required
Initial Here

I certify, to the best of my knowledge/ability, that the attached rendering/drawing is true, complete, and drawn to scale. As lot Owner, I accept liability for any inaccuracies that may be proven in the future and release the Association, Management and its Agents from any responsibility.

Required
Initial Here

Disclaimer: The Association reviews applications primarily based upon aesthetic qualities and to a lesser degree, basic construction practices. Owners (and their contractors) are responsible for determining and ensuring that all applicable municipalities, county and state requirements are met and all necessary permits, variances, etc. are obtained. Should the requirements set forth by the municipality, county and state be more stringent/restrictive than those established by the Association, the more stringent/restrictive requirements prevail.

Submission Options

- **E-mail Manager: alex@pwraleigh.com**
- **E-mail Board: dwoods1309@gmail.com**
- **Mail: Heritage Spring HOA
PO Box 20969
Raleigh, NC 27619**