

HAWFIELDS CROSSING HOMEOWNERS ASSOCIATION
Architectural Control Committee (ACC)

REQUEST FOR ARCHITECTURAL APPROVAL

NAME: _____

ADDRESS: _____

LOT#: _____ BLOCK: _____ PHONE: Work: _____

Home: _____

Mobile: _____

EMAIL: _____

Type Of Modification:

_____ Addition _____ Fence _____ Exterior Painting

_____ Deck/Patio _____ Outbuilding _____ Storage

_____ Other: _____

_____ Landscape Modification (Describe) _____

IMPORTANT: PLEASE ATTACH A DETAILED DESCRIPTION OF IMPROVEMENTS & MODIFICATIONS, INCLUDING THE FOLLOWING, WHEN APPLICABLE:

1. Location

2. Size

3. Color

4. Material

5. Contractor

6. Copy of Property

Survey, with proposed
changes & additions shown

7. Plans/Drawing

8. Roof Design

9. Exterior Finish

10. Dimensions

11. Utilities

12. Types of plants, quantities, addition or removal
existing or new planting bed, edge treatment

Estimated Start Date: _____

Estimated Date Of Completion: _____

The Architectural Control Committee Reserves The Right To Request More Information For Clarification And Requests For Multiple Changes Should Be Submitted Separately.

Mail Applications To: Allenton Management
C/O Arnold Spell
PO Box 3250
Durham, NC 27715-3250

Reviewed By Management: _____ Date: _____

Approved By ACC: _____ Date: _____