

Hermitage Meadows Homeowners Association

PLEASE RETURN TO YOUR COMMUNITY MANAGER

Homeowner Request for an Architectural Change

FAX to (615) 297-9340

Email: hermitagemeadowshoa@gmail.com

NAME: _____ PROPERTY ADDRESS: _____

PHONE: _____ CELL: _____ EMAIL: _____

Description of proposed improvements *[Please include architectural drawing and/or pictures, site plan with improvement proposal highlighted, materials to be used, description, paint color chip, etc.] Please describe in detail.* You may be contacted for more information.

SKETCH OUTLINE OF PROPOSED HOME IMPROVEMENT BELOW

Include location of lot lines, house, driveway, patio/deck & proposed improvement

PLEASE CONSULT YOUR DEED OF RESTRICTIONS WHEN PLANNING A PROJECT

For a copy, please go to www.hermitagemeadows.com under "Governing Documents"

Proposed Start Date: _____

Proposed Completion Date: _____

PLEASE DO NOT WRITE INSIDE THIS BOX

FOR OFFICE USE:

Date Plan Submitted: _____

Date Plan Reviewed: _____

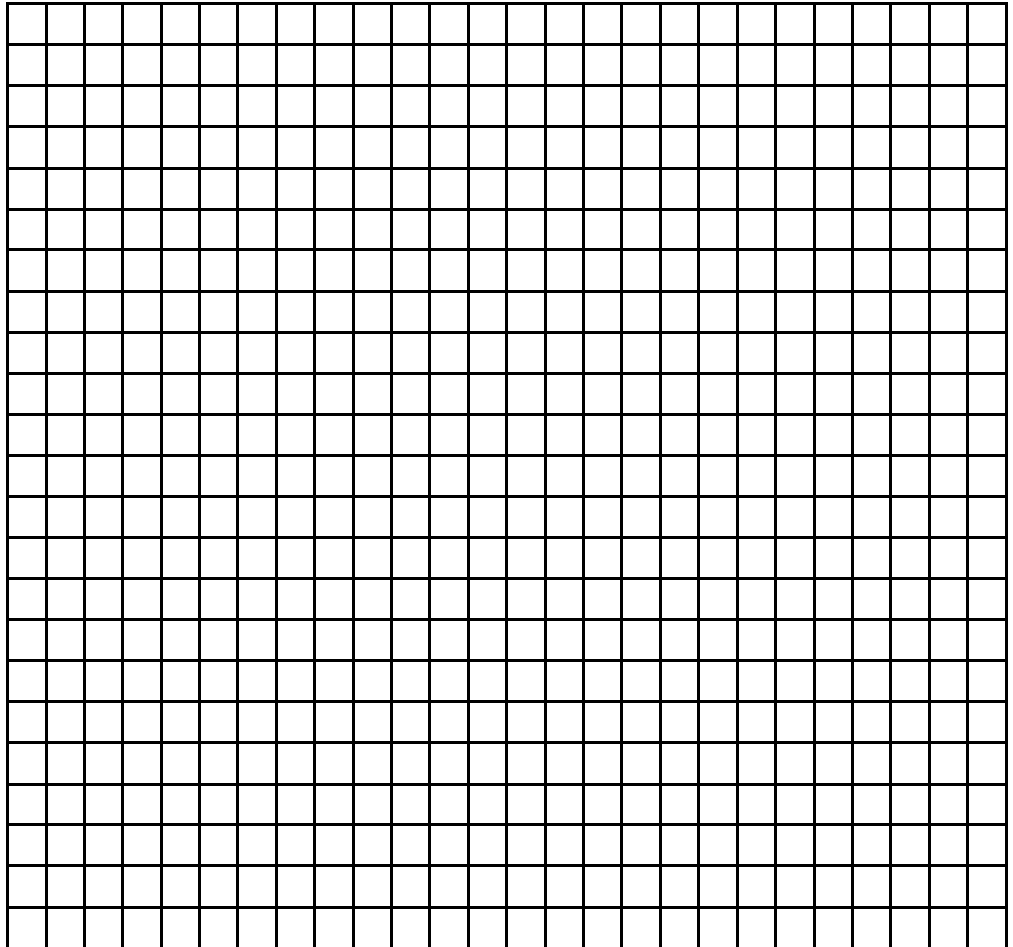
Approved:

Denied:

Approved with Conditions:
(see below)

Comments: _____

Architectural Review Committee Chair:



NOTICE: For your protection, inquire with the City and/or County about all permit requirements before any work on your property involving new construction, alteration, modification or additions. Approval of any structure by the ARC Committee is in no way a certification that the structure has been built in accordance with governmental rules or that the structure complies with sound building practices or design.