

ORANGE SHOALS HOMEOWNERS ASSOCIATION
REQUEST FOR ARCHITECTURAL CHANGE/ADDITION
*****WORK MAY NOT BEGIN UNTIL PROPER APPROVAL IS GIVEN*****

Date Submitted: _____ / _____ / _____

Owner Name(s): _____

Address: _____

Email: _____

Home Phone: _____ Work Phone: _____

Description and EXACT LOCATION of Improvement proposed: (please include architectural drawings, sketches, pictures, contractor's specifications, site plans, list materials, etc. if applicable):

Proposed Start Date: _____ Proposed Completion Date: _____

Note: Remember to allow the appropriate time for approval. The Architectural Standards Committee may take up to *Thirty (30)* days to review plans and specifications.

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Community One Associates
1235 Old Alpharetta Road, Suite 100
Alpharetta, GA 30005
Attn: Seneca

ARCHITECTURAL STANDARDS COMMITTEE ACTION

Date Received: _____ Date Reviewed: _____

[] Approved [] Conditional Approval* [] Denied*

*Require Explanation _____

Approved By: _____