

Crowfield Village ARB Request

Request for Architectural Review Board Approval for Improvements or Modifications

Items 1 through 8 to be completed by the homeowner:

1. Name of Homeowner: _____

2. Date of Request _____ Email Address: _____

3. Home Address _____

4. Telephone: Home: _____ Mobile: _____

5. Description of Request: _____

6. Attach 2 copies of your plat or sketch showing the type of proposed modification or addition. (such as fences, landscaping, porches, decks, sheds, satellite dish, etc.)

7. Requested start date: _____ 8. Approximate completion date: _____

*The review process generally takes up to 30 days. However, the more information you include in your request it may expedite the review of your request. We encourage you to be specific in your information such as pictures of the type of fencing and plats showing exact locations.

PLEASE ALLOW 30 DAYS FOR PROCESSING THIS REQUEST

Please Note: Your application will not be considered complete and ready for review unless application is submitted with property plat and details about your modification.

To Be Completed By the ARB

Date ARB received request: _____ Approved without conditions: _____

Approved with the following conditions: _____

Additional information required: _____

Not approved for the following reasons: _____

ARB Signatures: _____

Date: _____

Date of ARB action: _____ Date Homeowner Notified: _____

Deliver or mail completed request form and supporting documentation to:

Crowfield Village Homeowners Association
201 Sigma Dr Ste. 350
Summerville, SC 29486

Or via **Fax** to 843-278-6853 or **Email** to crowfieldvillage.sc@fsresidential.com