

Seven Gates Homeowners' Association

Architectural Modification Request

Due to the additional information required when submitting this request, it cannot be submitted on-line. **Remember**, all necessary City building permits MUST be obtained prior to work being done.

Please print this form and attach any necessary items suggested below.

The more information included will make it easier for the Board to reach a decision.

- | | | |
|---------------|--------------------|---------------------------|
| 1. Location | 6. Roof Design | 11. Utilities |
| 2. Size | 7. Plans/Drawings | 12. Copy of Property Plat |
| 3. Color | 8. Photos/Brochure | Map with proposed |
| 4. Material | 9. Exterior Finish | changes/additions |
| 5. Contractor | 10. Dimensions | shown |

Type of Modification:

Addition Exterior Painting Patio Porch Interior Construction/Remodeling

Other: _____

The Board has 30 days to make all decisions once all necessary items have been received.

If information is incomplete, the request process must be started over.

Name: _____ Date: _____

Street Address: _____ Home Phone: _____

City: _____ State: ____ Zip: _____ Work Phone: _____

Email: _____ # Pages in Request: _____

Description of Request: _____

I hereby request that the Design Review Committee review the attached request. I agree not to begin work until I have written approval and to be responsible for the ongoing maintenance and upkeep on the alteration/addition in perpetuity. The upkeep responsibility will transfer to all future owners as well. Further, I agree that all work will be in a workmanship-like fashion and comply with all building codes.

Date: _____

(Homeowner's Signature)

All necessary items need to be mailed to: **Lambeth Management**
PO Box 8071
Greensboro, NC 27419

or faxed to: **(336) 464-2576**

or emailed to: **Tiffany.Lmgmt@gmail.com**

For Office Use Only:	
Date Received: _____	<input type="checkbox"/> Approved
Received By: _____	<input type="checkbox"/> Denied