POINTE SUMMIT ARCHITECTURAL COMMITTEE REQUEST



Return Complete Packet to: **Hinson Management, Inc. ATTN: Kimberley**

kim@hinsonmanagement.com 8499 Valley Falls Road (physical address) PO Box 160207, Boiling Springs, SC 29316 Phone: (864) 599-9019 ext. 117

Manager Use Only	
Received	-
Sent to committee	-
Received decision	-

Property Address:		
Phone Number	_	
I none rumber.		
<u>Category of Improvemen</u>		
☐ Out Building/Shed	☐ Driveway/Parking	☐ Fence Height
☐ Landscaping	☐ Patio/Screened Porch	Style
☐ Addition	Other:	Color at ensures an adequate distance for future maintenance
of said fencing and also the enti	re property from the fence line to the property line. permission to attach to a neighboring fence	It is also the property owner's responsibility to obtain e if applicable.
Checklist of Items ARC v	vill need to proceed: **Requests will not be	e sent to the committee for consideration without
	included. If you have questions, please refer to	
☐ Photo, Brochure or Ske	and dimensions of improvement indicated tch of Improvement mprovement including materials, colors are	
Contractor:		Phone Number:
By signing below the applitude the architectural review comply with all Federal, Sutilities, and property lines	icant understands that by completing this for committee and all decisions are final. It is usefate, County, and Local codes. It is the app Approval is void if improvement is not sta	orm he/she agrees to all guidelines set forth by inderstood that the applicant is responsible to plicant's responsibility to locate all easements, arted within ninety (90) days from the approva completion guidelines. Items submitted to the
Homeowner Signature:		Date:
	FOR BOARD OR COMMITTER	E USE ONLY
APPROVED:		Date:
DENIED:		Date:
Notes:		
Notes:		

Architectural Committee Request Form Instructions

This guide will aid you in completing an Architectural Committee Request, incomplete requests will not be accepted. If you have any questions, contact your representative via the information on the top of the form. Requests will not be accepted by any third party.

The Form

Where to return your form, email is preferred, and contact information for your representative.

Check any box that applies to the improvements you are requesting. You may request multiple projects in one packet if they will be completed at the same time.

Further information and an example on the following page

A visual representation of your requested improvement. This can be a drawing, picture form a brochure or an image from the internet.

You must sign and date your request before submitting, electronic signatures are **not** accepted.

Return Complete Packet to: Hinson Management, Inc ATTN: Name nameSchimoemmanagement.com 8499 Valley Falls Road (physical address) PO Box 160207, Boding Springs, SC 29316 Phone: (864) 599-9019 ext. 1## Phone: (864) 599	Notes:	APPROVED: FOR BOARD O	omeowner Signature:	Ontractor: Phone Number: By signing below the applicant understands that by completing this form he/she agrees to all guidelines set forth the architectural review committee and all decisions are final. It is understood that the applicant is responsible to comply with all Federal, State, County, and Local codes. It is the applicant's responsibility to locate all easements, tilities, and property lines. Approval is void if improvement is not started within alacty (90) days from the approvalate. Standards of the neighborhood's governing documents apply to completion guidelines. Items submitted to the committee will not be returned.	Written description of improvement including materials, colors and sizes	Site Plan with location and dimensions of improvement indicated	hecklist of Hems ARC will need to proceed: **Requests will not be sent to the committee for consideration without supporting documentation included. If you have questions, please refer to the instructions included with this form.**	ibility of each owner to and also the entire prope	Landscaping Pato/	Shed Check all th	Phone Number:	T A 34	Homeowner Name:	Property Address:	Management, 188	D		Return Hinson Mani
	Date:	R COMMITTEE USE ONLY Date:		Phone Numbers by completing this form brishe agrees to sisons are final. It is understood that the ap al codes. It is the applicant's responsibility approvement is not started within alacty (9 g documents apply to completion guideling ittee will not be returned.	g materials, colors and sizes	provement indicated	**Requests will not be sent to the comm uestions, please refer to the instructions	d fencing in a manner that ensures an adopt line to the property line. It is also the prope ch to a neighboring fence if applicable.	Screened Porch	ly) vay/Parking Fence					(64) 599-9019 ext. 1##	7. Boiling Springs, SC 29316	nxonmanagement.com	Complete Packet to: gement, Inc ATTN: Name

Your contact information, so we can contact you with information regarding your request

If you are requesting a fence, indicate the height, style and color here

Describe your requested improvement. Include what you are requesting, where it will be placed and a description of what it will look like.

Include the name and phone number for the contractor completing the project. If you will be doing the work yourself, simply write "self" on this line.

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Examples of Site Plan with location and dimensions of improvements indicated

