

Alyson Pond Homeowners' Association
ARCHITECTURAL PLAN REVIEW FORM

Homeowner

Name.....

Address.....

Telephone.....

Email/Fax.....

Description of proposed addition/change/improvement including materials to be used:

Neighbor Advisement

All neighbors who are visually impacted by the proposed change must be informed of the change and given a chance to voice any concerns. If there are objections, neighbors may appeal to the Architecture Committee and to the Board. Final approval of any request rests with the Board.

By signature below, I acknowledge that I have been shown the details of the project proposed on this form and that if I object to this change I can appeal to the Architecture Committee and/or to the Board.

NAME/ADDRESS 1.....

NAME/ADDRESS 2.....

NAME/ADDRESS 3.....

INCLUDE (if applicable) Plot Plan, Elevation, Color Sample

SUBMIT FORM TO: Charleston Management Corporation

P.O. Box 97243

Raleigh NC 27624

919-847-3003

fax 919-848-1548