

Summerpark

Architectural Control Committee Request

Name: _____ Request Date: _____

Address: _____ Day Phone: _____

_____ Night Phone: _____

E-Mail: _____

Nature of Request (draw your request on plat w/dimensions & attach) a copy of your plat showing all dimensions, & location of improvement must be attached to be considered complete.

ONLY COMPLETE THIS SECTION IF YOU ARE REQUESTING A FENCE. FOR ALL OTHER REQUESTS PLEASE ATTACH A DETAILED DESCRIPTION TO THIS FORM.

Name of Fence Contractor _____

Contractor Phone # _____ Fax # _____

Type of Fence: SHADOWBOX ONLY. Fence Height: _____

PLEASE INSTALL YOUR VERTICAL SUPPORTS JUST INSIDE YOUR PROPERTY LINE SO THAT YOUR FINISHED SIDING BOARDS ARE "RIGHT ON" THE PROPERTY LINE. BUTT UP TO OR ATTACH TO ANY EXISTING FENCE THAT YOU ARE SURE IS RIGHT "ON" YOUR COMMON PROPERTY LINE.

IT IS YOUR RESPONSIBILITY TO MAKE SURE THAT YOUR CONTRACTOR RECEIVES AND FOLLOWS THESE GUIDELINES.

I hereby request that the Architectural Control Committee review the above 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 or addition. The upkeep responsibility will transfer to all future owners as well. Further, I agree that all work will be in workmanship like fashion and comply with all building codes.

IT IS YOUR RESPONSIBILITY TO GET APPROVAL FROM THE TOWN OF SUMMERVILLE (PHONE # 843-851-5200)

Owner

Before digging you must call:
Palmetto Utility Protection Services (PUPS)
1-888-721-7877 and give at least 3 days notice.

Owner

If joint ownership, both parties must sign.

Approved Approval Date: _____

Disapproved Board Member: _____

Return form with drawing on plat to:
Community Management Group 349 Folly Road, Suite 2B, Charleston, SC 29412
Phone: 843-795-8484 Fax: 843-795-8482

(Please allow **30 days** for a response by the committee)

PLEASE ATTACH COPY OF PLAT TO REQUEST FORM