

Architectural Review Request Form

Villages of Leacroft Homeowner's Association, Inc.

Submit completed forms to: Paul Greiner at 4501 Bellmore Court,

Or Via Email to: leacroftarc@gmail.com.

Contact Information

Last Name	First Name	Date
Phone (Primary)	E-mail Address	
Mailing Address		
City	State	Zip Code
Property Address (If different than above)		

Architectural Review Request Information

Type of Request	Details
<input type="checkbox"/> Addition <input type="checkbox"/> Exterior Painting of <input type="checkbox"/> Siding <input type="checkbox"/> Trim <input type="checkbox"/> Shutters/Door <input type="checkbox"/> Fence <input type="checkbox"/> Garage/Carport/Driveway <input type="checkbox"/> Lighting <input type="checkbox"/> Mailbox (Standard Only) <input type="checkbox"/> Major Landscaping <input type="checkbox"/> Pool <input type="checkbox"/> Porch/Deck/Patio <input type="checkbox"/> Roof/Shingles <input type="checkbox"/> Shed/Utility Building <input type="checkbox"/> Siding <input type="checkbox"/> Other _____	Location <input type="checkbox"/> Back Yard <input type="checkbox"/> Front Yard <input type="checkbox"/> Side Yard(s) Nature of Change <input type="checkbox"/> Replacing with original <input type="checkbox"/> Changing existing <input type="checkbox"/> Completely new

Additional Information

Have you received a violation letter related to this request? Yes No	Contractor Name/Phone <input type="checkbox"/> Self <input type="checkbox"/> N/A
Estimated Start Date	Estimated Completion Date
Detailed Description	

Required Attachments

The numbers in parenthesis correspond to the types of request shown below. (Example: For a Fence request, you need to provide a property survey, proposed plan, and color sample).
Failure to provide the appropriate attachments may result in ARC Request denial.

	Yes	N/A
Property Survey (Draw in location of change) (1, 3, 4, 7, 8, 9, 11)	<input type="checkbox"/>	<input type="checkbox"/>
Building Permit Approval (1, 4, 8)	<input type="checkbox"/>	<input type="checkbox"/>
Proposed Plan/Drawing/Picture (1, 3, 4, 5, 6, 7, 8, 9, 11)	<input type="checkbox"/>	<input type="checkbox"/>
Material/Color Sample (1, 2, 3, 4, 6, 8, 9, 10, 11, 12)	<input type="checkbox"/>	<input type="checkbox"/>
Contractor's Estimate (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Copy of HOA Violation Letter (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

¹Addition, ²Exterior Painting, ³Fence, ⁴Garage/Carport/Driveway, ⁵Lighting, ⁶Mailbox, ⁷Major Landscaping, ⁸Pool, ⁹Porch/Deck/Patio, ¹⁰Roof/Shingles, ¹¹Shed/Utility Building, ¹²Siding

ARC Office Use Only

Date Received	Date of Status Review
Status <input type="checkbox"/> Accepted <input type="checkbox"/> Denied <input type="checkbox"/> Request for more information <input type="checkbox"/> Sent to HOA Board for Exception due to special circumstances	
Reason/Notes	
Restrictions	
Initialed By ARC Chair _____ ARC Member _____ ARC Member _____ ARC Member _____	