

MAGNOLIA CREEK OF FORSYTH HOMEOWNER'S ASSOCIATION

REQUEST FOR ARCHITECTURAL CHANGE/ADDITION



Homeowner Name(s) _____ Date: _____

Homeowner(s) Address: _____

Home Phone: _____ Cell Phone: _____

Below, please provide a written description, to include the **EXACT LOCATION**, of the proposed improvement.

IN ADDITION: Please submit any or all the following *as applicable* to your request:

Architectural Drawings, Sketches, Pictures, Contractor's Specifications, Site Plans, List and Types of Materials, and Color Choices. *If additional space is needed, please use the additional page attached to this request.*

Proposed Start Date: _____ Proposed Completion Date: _____

Homeowner Signature(s) _____ Date Signed: _____

NOTE: The **Architectural Control Committee** may take up to 45 days to review plans and specifications.

However, we make every effort to respond as quickly as possible. Please send this form, and any supporting documents to:

Email: acc@mymagnoliacreek.com

Mail: Magnolia Creek of Forsyth Homeowners Association
4720 Magnolia Creek Drive
Cumming GA 30040

As a condition precedent to granting approval of any request for a change, alteration or addition to an existing structure, the applicant, their hires and assigns thereto, hereby assume sole responsibility for the repair, maintenance, or replacement of any such change, alteration, or addition. IT IS UNDERSTOOD AND AGREED THAT MAGNOLIA CREEK IS NOT REQUIRED TO TAKE ANY ACTION TO REPAIR, REPLACE, OR MAINTAIN ANY SUCH APPROVED CHANGE, ALTERATION OR ADDITION, OR ANY STRUCTURE OR ANY OTHER PROPERTY. THE HOMEOWNER(S) AND ITS ASSIGNS ASSUME ALL RESPONSIBILITY AND COST FOR ANY ADDITION OR CHANGE AND ITS FUTURE UPKEEP AND MAINTENANCE.

ARCHITECTURAL CONTROL COMMITTEE USE ONLY BELOW

Date Received: _____

_____ Approved

_____ Conditional Approval*

_____ Denied*

*Requires EXPLANATION:

A Minimum of 3 ACC Committee Members Signatures Required Below:

1. _____

2. _____

3. _____

Date: _____

Date: _____

Date: _____