

Jonathan Knolls Community Association
Architectural Review Committee Checklist for:
Home Additions, Alterations, and Landscaping Modifications

Lot Number: _____	
Property Owners Name/s: _____	
Current Address: _____	
Home Phone #: _____	E-mail Address: _____
Cell Phone #: _____	Fax #: _____
Contractor's Name: (if applicable) _____	
Contractor's Address: _____	
Contractor's Phone #: _____	Contractor's Cell Phone #: _____

REQUIREMENTS FOR NEW HOME SUBMITTAL

- 3 ARC Checklists fully filled out
- 3 Sets of Plans (please be as detailed as possible)
- 1 Set of samples, if applicable (brick, siding, trim, roofing, deck material, gutters, windows, doors)
- Any past fees, fines, and/or assessments, if applicable, that are due, paid in full
- Estimated date of commencement and completion

All changes and modifications must be noted on each document in red ink and initialed by owner.

TYPE OF WORK TO BE DONE

PLEASE NOTE: All submitted materials shall remain the property of the ARC and the Association. You should make a copy of your submittal for your records.

For a detailed explanation of architectural requirements please refer to Jonathan Knolls Community Association Covenants and Restrictions. The ARC shall meet within 30 days of the date submitted to review the plans and specification and other materials submitted by the applicant, and render its written approval or rejection thereof.

If you wish to Appeal the ARC regarding the decision below, you must appeal within 60 days.

If any modifications to the plans or material selections as submitted are to be made at a later date, those modifications must be submitted to the ARC for review and you must receive approval from the ARC before that work may commence.

I hereby acknowledge that I have read and fully understand the Jonathan Knolls Community Association architectural requirements.

Signature of Homeowner: _____ Dated: _____

Signature of Homeowner: _____ Dated: _____

FOR ARC USE ONLY:

Date received: _____ Initials: _____ ARC

Status: ___ Approved ___ Rejected ___ Conditionally Approved

Conditions for Approval (if applicable): _____

Comments from ARC: _____

ARC Signatures (at least two thirds of the ARC must sign below):

Signature One: _____ Date: _____

Signature Two: _____ Date: _____

Signature Three: _____ Date: _____