



APPLICATION FOR ARCHITECTURAL MODIFICATION

In accordance with the recorded covenants, conditions, and restrictions of the Association, and in order to protect each individual lot owner's rights and values, it is required that any lot owner considering improvement of their deeded property including, but not limited to, restrictions upon impervious cover, patio covers, decks, outside buildings, fencing, building add-ons, etc. You must submit the following information to the Committee **prior to initiating work on the planned improvements.**

Please return completed application to: arc@atmoslivingmg.com.

***** ONE FORM PER REQUEST *****

1. Completed and Signed Improvement Request Form (2 pages).
2. Complete & detailed building plans & specifications, material list, and color swatches, as applicable.
3. A site/plot plan showing the exact location of the proposed improvement. (Issued in your closing papers)
4. Photos, as applicable.

Owner Name: _____

Property Address: _____

Neighborhood Name: _____

Phone Number: _____

E-Mail address: _____

Vendor/Contractor Information: _____

Briefly describe the improvement you propose: _____

Location of improvement (check actual areas that apply):

- ☐ Front of dwelling ☐ Back of dwelling ☐ Side of dwelling
☐ Roof of dwelling ☐ Garage ☐ Front/Back Patio
☐ Other (describe) _____

Material to be used for the improvement (check applicable items):

- | | |
|---|---|
| <input type="checkbox"/> Brick – Color _____ | <input type="checkbox"/> Cement – Top Finish _____ |
| <input type="checkbox"/> Wood – Type _____ | <input type="checkbox"/> Stucco – Color _____ |
| <input type="checkbox"/> Iron - Fence Color _____ | <input type="checkbox"/> Flagstone – Color _____ |
| <input type="checkbox"/> Paint – Color (sample) _____ | <input type="checkbox"/> Stain – Color (sample) _____ |
| <input type="checkbox"/> Hardi-Plank – Color _____ | <input type="checkbox"/> Siding – Wood - Color _____ |
| <input type="checkbox"/> Siding - Aluminum _____ | <input type="checkbox"/> Rock/Stone – Color _____ |
| <input type="checkbox"/> Roofing Material _____ | <input type="checkbox"/> Masonry _____ |
| <input type="checkbox"/> Other (explain) _____ | |

Improvement Request Form – Page 2

Type of Improvement:

- | | |
|---|--|
| <input type="checkbox"/> Permanent/Temporary Basketball goal | <input type="checkbox"/> Pool – Above-Ground |
| <input type="checkbox"/> Stain/Paint Fence | <input type="checkbox"/> Pool – In-Ground |
| <input type="checkbox"/> Fencing/ Extend Fence | <input type="checkbox"/> Spa/Hot tub |
| <input type="checkbox"/> Paint Exterior | <input type="checkbox"/> Room addition |
| <input type="checkbox"/> Porch Railing | <input type="checkbox"/> Storage Building |
| <input type="checkbox"/> Play Structure/Front Yard Glider Swing | <input type="checkbox"/> Landscaping/Landscape Lighting |
| <input type="checkbox"/> Front Yard Statuary/Bird Bath/Water Fountain | <input type="checkbox"/> Wall Art/Outside Decor |
| <input type="checkbox"/> Permanent/Temporary Gazebo | <input type="checkbox"/> Front/Back Screen/Storm Door |
| <input type="checkbox"/> Front/Back Door | <input type="checkbox"/> Sprinkler System |
| <input type="checkbox"/> Gutters | <input type="checkbox"/> Stain/Paint Driveway |
| <input type="checkbox"/> Exterior Lights | <input type="checkbox"/> Extend Driveway |
| <input type="checkbox"/> Walkway/Pavers | <input type="checkbox"/> Solar Screens/Window Treatments |
| <input type="checkbox"/> Deck | <input type="checkbox"/> Arbor/Trellis |
| <input type="checkbox"/> Replace Roof | <input type="checkbox"/> Patio/Enlarge Patio/Patio Cover |

How much impervious cover will you be using? Sq. ft. _____

How much do you currently own? Sq. ft. _____

How much will you need to buy? Sq. ft. _____

NOTE: No approval will be given until you have sufficient impervious cover to complete the Improvement.

I understand that the reviewer will act on this request within (30) thirty-days of a **complete application** and contact me in writing regarding their decision. The (30) thirty-day process does not begin, until all necessary and pertinent information is received. I agree not to begin construction/installation without written approval from the Committee. I understand that all construction shall meet City/County code, and that Committee approval does not override City/County codes, but rather, is intended to work in conjunction with them.

Homeowners Signature/Date _____/_____

Construction Start Date/Estimated Completion Date _____/_____