

Architectural Control Committee Modification Review Form

Name:		_ Phone:	Date:
Address:		Email:	
ALL PROJECTS MUST I DATE LISTED HEREIN		THIN 90 DAYS FF	ROM WRITTEN APPROVAL
	Modifi Please provide a sepa	cation Type nrate form for each	project
 Fencing – specify mage of the location on plat diage of the local color name and nume of the samples or image of the local color name and nume of the local color name and numerous name of the local color name	ram. tion, manufacturer ber, and provide ges. 2 sets of plans. / Modification – ns. vide detailed plans	and color Recreation type, location images Tree Remonspecies (modisease report Other – proportion and other second	rovide description, images, supporting documentation
500 Sugar Mill Rd Atlanta, GA 30350		ty Management Ste 200B	mail: <u>ARC@heritageproperty.com</u> Fax: 770-451-3919
			ASE ALLOW UP TO 30 DAYS FOR RMATION WILL RESULT IN DELAY.
ARCHITECTURAL CONTRO	L COMMITTEE ACTION	1	
Date Received:	By:	Method	of Delivery:
ACC Reviewer:	Date:	Status:	
ACC Reviewer:	Date:	Status:	
Date of Response:	By:	Method of Response:	

CONDITIONAL APPROVAL

APPROVED

DISAPPROVAL