

# FAIR OAKS

## Architectural Request Form

Fair Oaks Homeowners Association, Inc.

C/o CAS, Inc.

4917 Waters Edge Dr., Suite 140, Raleigh, NC 27606

919-788-9911 (Office) 910-295-0182 (Fax)

Name \_\_\_\_\_ Telephone \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Lot# \_\_\_\_\_

Estimated Completion Date \_\_\_\_\_

1) Please provide a detailed description of the Architectural request.

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2) Please attach plot plan, pictures, drawings and any additional information that will aid in making a decision regarding your request.

- You **MUST** obtain approval **IN WRITING** from the Architectural Review Committee (ARC) **BEFORE** the start of any exterior change. The ARC is allowed up to 30 days to act on an application. Therefore, do **NOT** commit labor or materials until you have received written approval. Refer to the Architectural Guidelines for further information.
- Fences **MUST** be landscaped so that shrubs will cover 2/3's of the fence in 2 years where a fence faces a street. Note that the screening requirement applies to all fence installations; homeowners must plan their fence placement to avoid interference with their septic system. The screening requirement will not be waived.
- **MAJOR Improvements** such as Pools, Additions, etc require neighbor's signature on the plot map.

I understand that this application will be reviewed by the Architectural Committee and/or the Board of Directors. I further understand that the Architectural Committee and/or the Board of Directors have the authority to approve, approve with conditions or deny this request. If the request is denied, the requester has the right to appeal the decision within 30 days. This may be done by submitting the request for appeal in writing to the Board of Directors at the address above. The appeal will be considered at the next regular meeting of the Board of Directors. An appeal received 30 days after the denial from the Architectural Committee will not be considered.

3) The owner is required to review the proposed changes with all abutting neighbors. Note that notification does not indicate approval, but only that notification has taken place. The signatures indicate the neighbors are aware of the proposed changes and that they may attend an ARC or Board meeting to voice their opinion.

NAME	ADDRESS	SIGNATURE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

\_\_\_\_\_  
Homeowner Signature

\_\_\_\_\_  
Date

**THIS FORM IS NOT COMPLETE WITHOUT ALL APPROPRIATE ATTACHMENTS AND SIGNATURES**

Office Use Only:			
Received On:	Mailed: <input type="checkbox"/>	Faxed: <input type="checkbox"/>	Emailed: <input type="checkbox"/>
Approved: <input type="checkbox"/>	Approved w/Conditions: <input type="checkbox"/>	Denied: <input type="checkbox"/>	Incomplete: <input type="checkbox"/>
Comments:			