



OLD SUWANEE HOMEOWNERS ASSOCIATION

PO Box 1861
Suwanee, Georgia 30024

ARCHITECTURAL CHANGE APPLICATION

1. REQUESTED BY

HOMEOWNER NAME:	
ADDRESS:	
HOME TELEPHONE NUMBER:	
EMAIL ADDRESS:	

2. DESCRIPTION OF REQUEST

<p>A DETAILED DESCRIPTION OF MY REQUEST IS:</p> <p><i>(Attach additional page(s) as appropriate)</i></p>	
<p>HOMEOWNER RESPONSIBILITY:</p>	<p>It is the responsibility of the Homeowner to:</p> <ol style="list-style-type: none"> 1. Meet City and County requirements related to the laws of each including, but not limited to, permits, licensing and insurance. 2. Attach drawings including dimensions, type of materials & colors. Drawing must show location related to home and property lines. 3. If, approved by the OSHOA, execute the request as approved. Variances may result in withdrawal of the approval resulting in homeowner not being in compliance of agreed upon Covenants, Restrictions and Easements. 4. In order to maintain association records all communication must be written.
HOMEOWNER SIGNATURE:	
DATE:	

3. SUBMITTAL – Upon completion of Sections 1 and 2 the application is to be mailed to the Old Suwanee Homeowners Association at the address noted above.

4. ARCHITECTURAL CONTROL COMMITTEE – The following is for the use of the ACC.			
DATE RECEIVED BY ACC:			
DATE OF ACC RESPONSE:			
DISPOSITION: (Check One)			
	APPROVED	CONDITIONAL APPROVAL	DISAPPROVED
BOARD SIGNATURES:			
	VP – ACC	BOARD MEMBER	
DECISION BASIS:			