

**SOUTH HILLS ESTATES (SECTION II) HOMEOWNERS' ASSOCIATION  
ARCHITECTURAL APPROVAL FORM**

**TO: Architectural Review Committee**

From: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Date

Submitted: \_\_\_\_\_

Phone: \_\_\_\_\_

**Request the following architectural change be authorized:**

**DESCRIPTION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPECIFICATIONS (specify all that apply)**

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Height: \_\_\_\_\_

Materials: \_\_\_\_\_

**Drawing/Plan/Photo (attach if more space is necessary)**

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Applicant hereby warrants that Applicant shall assume full responsibility for:

- A. All landscaping, grading, and/or drainage issues relating to the improvements (including replacing bonds or escrows posted by the Developer currently in place that affect the Lot);
- B. Obtaining all required Town or County ordinances relating to said improvement;
- C. Complying with all applicable Town or County ordinances;
- D. Any damage to adjoining property (including common area) or injury to third persons associated with the improvement.

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TO: Homeowner  
FROM: Architectural Review Board

Your request for architectural change is hereby:      Approved      /      Disapproved

If disapproved, for the following reason(s):

\_\_\_\_\_