RIVERWOOD
COMMUNITY ASSOCIATION

Architectural Review

APPLICATION FOR ARCHITECTURAL REVIEW

Homeowner: _____ Phone: _____

Address: _____

Location of Improvement: _____ E-mail: _____

Home Improvement Request

In accordance with the Declaration of Covenants, Conditions, and Restrictions and Design Guidelines, application hereby made for review and approval of the following described improvements.

(Provide a description of your improvement below, attach another sheet of paper if needed.)

_____

_____

_____

_____

In addition to this application the following items are required for submittal:

One Set of Plans: The plans will need to show the following (where applicable) - site plan, floor plan, exterior elevations, roof design, exterior materials and finishes, landscaping plan and such other items as may be needed to reflect the character and dimensions of the improvements.

Summary: Written statement summarizing setback, height and square footage of proposed construction, how these numbers compare with the requirements, and whether any variance request are made.

It is hereby understood and agreed that approval of this application by a reviewer does not constitute approval as to compliance with applicable North Carolina law or Town of Clayton ordinances.

Signature:_____Date:_____

The application process may take up to 45 days.
If the application is incomplete, the reviewer will notify the applicant as to the needed documents and the application will not be further considered until receipt of these materials.

Agent Submittal

If you are an agent submitting on behalf of the owner, please complete the following:

Agents Name:_____

Company Name:_____

Type of Agent: _____

Contact #: _____

Basketball & Trampoline Request

☐ Permanent ☐ Portable

Location: _____

Left Side Neighbor: _____

Address:_____

Signature:_____

Right Side Neighbor: _____

Address:_____

Signature:_____

MAIL TO: Community Association
400 Riverwood Drive Clayton, NC 27527

DROP-OFF: Drop box located on brick entrance
380 Riverwood Drive, Riverwood Golf Club Community

For Office Use Only:

Received by: _____

Date: _____

Central Office:_____

Date: _____

Reviewed by:

ARB Board: ☐ Approved as noted ☐ Disapproved Signed:_____

Developer: ☐ Approved as noted ☐ Disapproved Signed:_____

Golf Committee: ☐ Approved as noted ☐ Disapproved Signed:_____