

# Bradford Chase HOA

## ARB Request Form

### Fence

Name: \_\_\_\_\_ Request Date: \_\_\_\_\_

Address: \_\_\_\_\_ Day Phone: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

*Indicate (in dark marker) your requested fence placement on a copy of your plat and attach it to this request (must be included to be considered complete)*

Name of Fence Contractor \_\_\_\_\_ Phone # \_\_\_\_\_

Fence Style: \_\_\_\_\_ Fence Height : \_\_\_\_\_ # of Gates \_\_\_\_\_

Color and type of material to be used: \_\_\_\_\_

**IT IS YOUR RESPONSIBILITY TO MAKE SURE THAT YOUR CONTRACTOR RECEIVES AND FOLLOWS THESE GUIDELINES AND TO OBTAIN ANY NECESSARY PERMITS REQUIRED BY DORCHESTER COUNTY**

I hereby request that the Architectural Control Committee review the above request. I agree not to begin work until I have written approval and to be responsible for the ongoing maintenance and upkeep on the alteration or addition. The upkeep responsibility will transfer to all future owners as well. Further, I agree that all work will be in workmanship like fashion and comply with all building codes.

\_\_\_\_\_  
Owner

Before digging you must call:  
**Palmetto Utility Protection Services (PUPS)**  
1-888-721-7877 and give at least 3 days notice.

\_\_\_\_\_  
Owner

If joint ownership, both parties must sign.

Approved

Approval Date: \_\_\_\_\_

Disapproved

Board Member: \_\_\_\_\_

**Return form with drawing on plat to: Bradford Chase HOA**  
P O Box 116, St. George SC 29477  
**Phone: 843-563-5005 EXT 16 Fax: 843-563-5095 or dres3hoa@bellsouth.net**  
You will be notified in writing following the review process