

Steeple Point

P O Box 116, St. George SC 29477

Architectural Control Committee Request

Name: _____

Request Date: _____

Address: _____

Day Phone: _____

Night Phone: _____

Nature of Request **(draw your request on plat w/dimensions & attach)**

A copy of your plat showing all dimensions, & location of improvement must be attached to be considered complete.

ONLY COMPLETE THIS SECTION IF YOU ARE REQUESTING A FENCE. FOR ALL OTHER REQUESTS PLEASE ATTACH A DETAILED DESCRIPTION TO THIS FORM.

Name of Fence Contractor: _____

Contractor Phone #: _____ Fax #: _____

Type of fence is to be **pressure treated natural wood (unpainted)**

Fence Height: _____

Location: **Please install your vertical supports just inside your property line so that your sideboards are right "ON" the property line. Tie into any existing fence. We don't want any GAPS between yards.**

Special

IT IS YOUR RESPONSIBILITY TO MAKE SURE THAT YOUR CONTRACTOR RECEIVES AND FOLLOWS THESE GUIDELINES.

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.

IT IS YOUR RESPONSIBILITY TO GET APPROVAL FROM DORCHESTER COUNTY Phone # 843-832-0020

Owner _____

Owner _____

If joint ownership, both parties must sign.

☐ Approved

Approval Date: _____

☐ Disapproved

Board Member: _____

Return form with drawing on plat to:

P O Box 116 St. George SC 29477

HOA2@dorchestersold.net

Phone: 843-563-5005 Fax: 843-563-5095

(Please allow **30 days** for a response by the committee)

PLEASE ATTACH COPY OF PLAT TO REQUEST FORM

IT'S THE LAW.....72 HOURS BEFORE YOU DIG CALL 1-888-721-7877