

**OLD TAYLOR FARM ASSOCIATION**

**APPLICATION FOR MODIFICATION(S)**

DATE: _____
NAME: _____
ADDRESS: _____
PHONE: _____
EMAIL: _____

**ALL APPLICATION REQUESTS MUST BE RECEIVED BY FIELDSTONE ASSOCIATION MANAGEMENT AT LEAST 30 DAYS BEFORE THE PROJECTED PROJECT START. YOU DO NOT HAVE PERMISSION TO BEGIN YOUR REQUEST UNTIL YOU RECEIVE WRITTEN ARC APPROVAL. PLEASE REFER TO YOUR COPY OF THE COVENANTS AND RESTRICTIONS BEFORE COMPLETING. IF YOU DO NOT HAVE A COPY OF THE COVENANTS FOR YOUR COMMUNITY THEY ARE AVAILABLE ON THE WEBSITE AT [www.fieldstonerp.com/oldtaylorfarm.com](http://www.fieldstonerp.com/oldtaylorfarm.com) Upon receipt the complete signed application and supporting documents will be forwarded to the ARC for review. Please allow up to thirty (30) days as outlined in the Covenants for a decision to be granted on your request. A written letter will be mailed notifying you of the decision. An application may be **RUSHED only** if you have damage or there is a cause for potential damage to your home or your neighbor's property. If you have questions on completing this application please contact (678) 430-8616.**

(Please mark selection with an X):

\_\_\_\_\_ **FENCES:** Please include all of the following supporting documentation: 1- A survey showing property lines. 2- A photo of the fence style that you wish to install. 3- A drawing showing where the fence will be built in relation to the house. This should include height of fence, length and gate placement, as well as identification of fencing materials to be used. 4- A plan to stain or paint the fence including manufacturer name, color number and color swatch.

\_\_\_\_\_ **LANDSCAPING (Landscape beds/ yard art):** Please include photos and or drawings of the landscape area. Please provide plant/ bush type if you are installing new materials. If you are placing statuary, fountains or other decorative items in existing landscape beds photos must accompany each landscape item showing placement.

\_\_\_\_\_ **POOLS & SPAS:** Please provide all of the following supporting documentation: 1- A photo of manufacturer style and number of pool/spa. 2- A detailed drawing (artist rendering) showing placement of pool/spa in relation to the house. 3- Detailed landscaping plan showing plant matter and placement. 4- Survey of lot showing property lines. If you are installing fencing a separate fence application must be submitted. 5- If you are installing decking please provide an artist rendering and be sure to include the dimensions of deck, material type and stain color, and number. 6- If you are installing railing you must provide a photo of the railing, and include a detailed drawing with the dimensions.

\_\_\_\_\_ **RECREATIONAL EQUIPMENT:** Please include all of the following supporting documentation: 1- A photo of the equipment. 2- Specific manufacturer name, number and type of the equipment. 3- A drawing or photo showing where the equipment will be placed in relation to the home.

\_\_\_\_\_ **REPAINTING:** Please include paint manufacturer, type and color along with color paint samples marked with where the color will be placed. (Ex: body, trim, shutters, front door, siding, garage doors, gutters, etc.)

\_\_\_\_\_ **ROOF:** Please include the manufacturer type and color of the roofing material. Please supply a photo of the shingle color you wish to use. (Please do not remit actual roofing shingles. Email color scans of shingle or links to manufacturer's website will suffice)

\_\_\_\_\_ **SCREENING & LATTICE:** Please include material, style, color, location & elevation along with a drawing of where this will be placed in relation to the home.

\_\_\_\_\_ **STRUCTURAL ADDITION/MODIFICATION:** Please include the following supporting documentation: 1- Survey showing property lines. 2- Detailed drawing/plans showing the dimensions and final look of the project. 3- City/County building permits 4- Detailed information on material used, paint manufacturer, color number and paint chip samples 5- Information on roofing shingles manufacturer, number and sample. (Please do not remit actual roofing shingles. Email color scans of shingle or links to manufacturer's website will suffice).

\_\_\_\_\_ **TREE REMOVAL:** Please include either a photo or sketch showing where the trees are currently located. If you are planning to replace the trees please note on the application the type of tree/plant matter that will be replacing the removed trees and the timeframe of the new installation.

\_\_\_\_\_ **OTHER:** \_\_\_\_\_

**IMPORTANT – ANY REQUIREMENTS OF THE CITY OF JOHNS CREEK AS IT RELATES TO THIS MODIFICATION ARE THE HOMEOWNER’S RESPONSIBILITY.**

ADDITIONAL COMMENTS:

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DATE TO START PROJECT: \_\_\_\_\_

ESTIMATED COMPLETION DATE: \_\_\_\_\_

**APPLICATION FOR MODIFICATIONS CONTINUED:**

For your protection, inquire with the proper authority, either city or county, regarding permit requirements before starting any work on your property. Projects involving new construction, additions, alterations, or any modification to structural, electrical, heating, water, gas or sanitary plumbing systems will most likely require a permit.

**INCOMPLETE APPLICATIONS WILL CAUSE DELAYS IN PROCESSING**

I further understand and agree that no work on this modification request shall commence until written approval of the ACC has been received by the property owner. I represent and warrant that the requested modifications strictly conform to the Declaration of Covenants, Conditions, Restrictions and Guidelines for the Olde Taylor Farm Homeowners Association. I further understand and agree that as the property owner, I am responsible for complying with all city and/or county building and zoning regulations.

**This request must be signed or it will not be processed.**

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return completed application and supporting documentation to:**

**JohnAlbano@fieldstonerp.com**

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**TO BE COMPLETED BY ARCHITECTURAL REVIEW COMMITTEE**

DATE RECEIVED: \_\_\_\_\_

DATE REVIEWED: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Committee Action:

\_\_\_\_ Approved as Submitted

\_\_\_\_ Conditionally Approved

\_\_\_\_ Disapproved

\_\_\_\_ Deferred until \_\_\_\_\_

\_\_\_\_ Withdrawn

\_\_\_\_ Returned for insufficient information

COMMENTS: \_\_\_\_\_

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