FORM FOR REQUEST FOR IMPROVEMENT/MODIFICATION REVIEW

Note: This form must be completed and returned prior to commencing any work. Incomplete Forms will be returned. Documentation submitted for review becomes the property of Meadowgate Homeowners Association.

Name:	Date:	
Address:	Home Phone:	
City/State/Zip:	Office Phone:	
er ji dan	Lot/Block/Unit:	

Please provide the ARC with all the information necessary to evaluate your request thoroughly and quickly. Requests must include, without limitation, the following information: site plan (including all dimensions), color chips (if applicable), detailed description of the request, list of materials, pictures, brochures (if applicable), and any other information as specifically required below or as required by the *Community Design Guidelines* for Meadowgate.

Description of Improvement or Modification Requested (attach separate sheets if necessary):				
<u> </u>				
	*			
Estimated Start Date:	Completion Date:			

Acknowledgement of Adjacent Homeowners (all homeowners sharing a common boundary line):
This acknowledgement will be considered by the ARC, but will not be binding upon the ARC. No application will be considered unless this section is complete.

Name	Signature	Lot/Block	Approve	Disapprove
			0	Q
			0	Q
			0	9
			9	Q

Please refer to the guidelines for required information to be included with this form – incomplete forms, including missing information will be returned without review.

I understand and agree that no work on this request shall commence until written approval of the Meadowgate ARC has been received by me. I represent and warrant that the requested improvements and/or modifications strictly conform to the *Community Design Guidelines* and that these changes shall be made in strict conformance to those guidelines. I understand that I am responsible with all city, county and state regulations.

Neither Meadowgate Homeowners Association, the Association Board of Directors, the ARC nor their respective members, officers, successors, assigns, agents, representatives or employees shall be liable for damages or otherwise to anyone requesting approval of an architectural alteration by reason of mistake in judgement, negligence or non-feasance, arising out of any action with respect to any submission. The architectural review is directed toward review and approval of site planning, appearance and aesthetics. None of the foregoing assumes any responsibility regarding design or construction, including, without limitation, the structural integrity, mechanical or electrical design, methods of construction, or technical suitability of materials. I hereby release and covenant not to sue all of the foregoing from/for any claims or damages regarding this request or the approval or denial thereof.

Homcowner's Signature	Date
Homeowner's Signature(all owners must sign)	Date
FOR ARC USE ONLY:	
Date Received Approved Denied Denied	By (ARC Chair/Date)
Conditions: This approval is valid until resubmit the request.	. If the project has not been completed by then, then the homeowner must
Comments:	
4	
Final Inspection Date Approved Rejected*	By (ARC/Property Manager)
*If rejected, please attach separate	e sheet explaining reason, corrective action required, and completion date.

Homeowner must acknowledge by signature.

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NOTIFICATION FORM FOR THE INSTALLATION OF DBS OR MMDS SATELLITE DISH OR ANTENNA

Name:

Note: This form must be completed and returned prior to installation. Installation in a location other than one of the preapproved locations requires ARC approval. Incomplete Forms will be returned. Documentation submitted for review becomes the property of Meadowgate Homeowners Association.

Address:	Home Phone.	<u> </u>					
City/State/Zip:	Office Phone:						
	Lot/Block/Unit:						
C/(3/ D/4400 == 12/)							
Description of Installation Location (use other side if necessary):							
Estimated Start Date: Completion D	ate:						
I acknowledge that I have read, understand and have complied or will completurent guidelines with respect to the installation of satellite dishes or antenn Homeowner's Signature Date Date (all owners must sign)	nas.	Association's					
FOR ARC USE ONLY:							
Date Received							
☐ Meets Guidelines ☐ Deviation Approved ☐ Deviation Denied							
By (ARC Chair/Date)							

Date: