

**Architectural Review Application**

**Lot# / Address:**

Agreement: I acknowledge and agree with the following requirements for the Architectural Review Process for Regal Pines Subdivision:

1. I have read and understand the “Covenants, Conditions and Restrictions” and agree to comply with these covenants, restrictions, and guidelines.
2. I understand that I am responsible for completing the project as described by the drawings and specifications submitted to and approved by the ACC. It is further understood that any changes to these plans must be submitted in writing to the ACC for approval prior to implementation.
3. I understand that the ACC will enter onto my property to make reasonable inspections of the construction site and that permission of such actions is granted for all ACC and or their Agents.
4. I understand that no construction or changes can be made to site or construction plans without prior written approval from the ACC.
5. I understand that the ACC may reject this application if my project does not meet the ACC Guidelines or if the appropriate documentation and information requested is not submitted.
6. I understand that even though the ACC has approved my plans, I am completely responsible for complying with all the building codes, covenants and restrictions that may be applicable to my property.

Owner Signature: \_\_\_\_\_ Application Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Owner Signature: \_\_\_\_\_ Application Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

ACC Representative Signature: \_\_\_\_\_ Date Received \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*(The following is for ACC use only:)*

Approved \_\_\_\_\_ Rejected \_\_\_\_\_ ACC Representative Initials \_\_\_\_\_

Approved with the following ACC Modifications:

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Submit completed applications to: Regal Pines Property Owners Association  
 Architectural Control Committee  
 c/o Bill Hargrove Fax: (803) 328-0364  
 249 Blue Heron Drive; Rock Hill, SC 29732

**New Construction**

House Type:     1 Story                       1½ Story                       2 Story

Basement:         Basement                       Crawl Space

Garage:             Side Entry                       Rear Entry                       Detached

Lot Type:           Corner                       Standard                       Lake Front

Total Square Footage: \_\_\_\_\_ Heated: \_\_\_\_\_ Unheated: \_\_\_\_\_

Size of Structure: \_\_\_\_\_ (Length X Width)                      Height: \_\_\_\_\_

Number of Stories (not including cellar or basement): \_\_\_\_\_

Distance to Property Lines:

Front: \_\_\_\_\_ Left Side \_\_\_\_\_ Right Side: \_\_\_\_\_ Back: \_\_\_\_\_

Foundation Material: (Brick, Stone, etc): \_\_\_\_\_

**BUILDING SPECIFICATIONS FOR EXTERIOR MATERIALS AND COLOR SCHEDULE**

Location	Exterior Materials (Wood, brick, etc.)	Exterior Colors: Mfgs. Name	Color Name	Color Number
Exterior Finish:				
Trim Material:				
Windows:				
Roof Type/ Pitch:				
Stoop & Steps:				
Walkway:				
Driveway:				
Shutters:				
Front Doors:				
Garage Doors:				
Fence:				
Gutters:				

Exterior Lighting: (Brand/ Design)	
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Estimated Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Estimated Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Builder Information:

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

Primary Contract: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

License #/ State: \_\_\_\_\_

**Application for Design Review**

All information requested in the following application must be accurately completed by the property owner(s). Your application must be submitted to the ACC along with all applicable Plans and Documents following the submittal guidelines as set forth in the Covenants and Restrictions for Regal Pines. Please make sure your application is signed and dated.

Lot Number: _____	Street Address: _____ _____
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Property Owner Information:

Name: \_\_\_\_\_

Mailing Address  
(City, State, Zip): \_\_\_\_\_

Phone Numbers:    Home: \_\_\_\_\_  
                          Office: \_\_\_\_\_  
                          Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please check one of the following to identify your current project:

- New Construction: (Form 1)                       Changes to Original Plan (Form 2)
- Improvements / Additions (Form 3)

**Design Review Request for the Following:**

- Building Elevations (four sides)     Floor Plan     Exterior Veneers, Materials, Color Scheme
- Building Elevations     Site Plan     Landscape Plan     Fences     Shoreline Stabilization
- Other \_\_\_\_\_
- \_\_\_\_\_ Sets of Plans Included