

**Architectural Review Application**                      **Lot# / Address:** \_\_\_\_\_

Agreement: I acknowledge and agree with the following requirements for the Architectural Review Process for Herndon Heritage 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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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



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 Herndon Heritage. 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

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Sets of Plans Included