HIGHLANDS VIEW HOMEOWNERS ASSOCIATION, INC.

C/O Community Management Associates 1465 Northside Drive, Suite 128 Atlanta, GA 30318 Phone: 404-352-5470 Fax: 404-355-9561

ARCHITECTURAL CONTROL COMMITTEE REQUEST FOR MODIFICATION FORM

Instructions: Please complete this entire form and submit it to the Homeowners Association at the above address. As per the Declaration of Covenants and Deed Restrictions, the Architectural Control Committee and/or Board of Directors must approve any and all exterior modifications (including any landscaping around the town home).

(Please provide as much contact information as possible to expedite your request without delay)					
Owner name: Home Phone:		Unit ad	dress:		Smyrna, GA 30082
Home Phone: E-mail Address:	Bu	siness Phone:		Mobile:	
				_	
PLEASE NOTE:	of acid whit can be	aa.t a	it modification(a)	(if you are a towar	t non much have unitten and
notarized documentation				(ij you are a tenan	t you must have written and
2. An incomplete request f				i	
Nature of desired Modif desired modifications)	fication: (be speci	fic; you may	also enclose pho	tographs and/or dra	wings to assist in describing
of receipt by the Chairpers complete). Modification ap	son of the Architec oproval certificates nants and Deed Re	tural Control run with you strictions, if o	<u>Committee</u> of an runit. Therefore r when you sell you	accepted request fo , they must be given	n will be given within 14 days orm (one that is accurate and to a buyer, along with a copy ep the certificate, and a copy
Signature of owner(s): _				Date	
				Date	
Date received by the ACC (Chairperson:			Initials:	
Committee Action:	Approved	Denied	Date		
Comments:					

Please keep a copy of this document for future reference as you will need it if you choose to appeal this notice.