

**CANONGATE VILLAGE**  
*Architectural Control Committee*

**Home Improvement Request Form**

*Directions* – Please **PRINT** clearly. Complete each section of this form, sign and date the form.

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Homeowner Name : \_\_\_\_\_ Date : \_\_\_\_\_

Street Address : \_\_\_\_\_ Phone : \_\_\_\_\_

Email : \_\_\_\_\_ Alt. Phone : \_\_\_\_\_

*Section 1*

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**Please indicate the improvement(s), which you propose:**

- New Structure / New Project
- Modification of Existing Structure / Project
- Change Color or Material Composition of House
- Installation Pool / Shed / Playground Equipment
- Landscape Screening Project / Fence
- Concrete / Paver / Stone Project
- Grading of Terrain

**Please describe improvement in more detail which you marked above (Be Specific)**

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**List the current color(s) and material composition of your primary home. Please be advised that any outbuilding, must match the exterior of your home (style, color, and material composition).**

House Color: \_\_\_\_\_

Trim/Shutter Color: \_\_\_\_\_

Exterior Composition (siding / brick, etc.): \_\_\_\_\_

Garage Door Color: \_\_\_\_\_

**Location of improvement(s) which you propose** – Be specific, showing to scale the property lines, building set back lines, easements, fences, sidewalks, patios, pools, distances from all sides of the improvement to property lines and pool equipment location. **A PLAT OR SURVEY IS REQUIRED.**

- Front yard                       Back yard                       Side yard

Location on property as viewed from the front of the lot: \_\_\_\_\_

Distance of structure from property line(s): \_\_\_\_\_ ft.

**Construction / Installation Dates**

Anticipated Start Date: \_\_\_\_\_ Anticipated Completion Date: \_\_\_\_\_

**Who Will Work On This Improvement?**

Homeowner

Licensed Contractor: Name \_\_\_\_\_  
Phone \_\_\_\_\_

*Section 2*

If your project / plans will change the appearance of your house or lot in any way, complete the section below:

**Accessory Structure, Outbuilding, Color and / or Material Composition change to existing house**

1. Type of Structure: \_\_\_\_\_
2. Purpose of structure: \_\_\_\_\_
3. Dimensions: Height: \_\_\_\_\_ ft. Width: \_\_\_\_\_ ft. Length: \_\_\_\_\_ ft.
4. Siding Material:  Composite  Brick / Stone/Stucco  Wood
5. Roof Material:  Architectural Shingle  3-tab Shingle  Wood
6. Roof / Shingle Color \_\_\_\_\_ Manufacturer \_\_\_\_\_
7. List brick type: \_\_\_\_\_ Brick color: \_\_\_\_\_
8. List stone type: \_\_\_\_\_ Stone color: \_\_\_\_\_
9. List primary color of structure or new color change: \_\_\_\_\_ Note: **COLOR**  
**SAMPLES MUST BE PROVIDED WITH YOUR REQUEST.**
10. List accent or trim colors of structure or new color change: \_\_\_\_\_ Note: **COLOR**  
**SAMPLES MUST BE PROVIDED WITH YOUR REQUEST.**
11. Shutter Color: \_\_\_\_\_
12. Windows: Number \_\_\_\_\_ Type \_\_\_\_\_
13. Number of doors: \_\_\_\_\_ Type of door(s): \_\_\_\_\_ Color of door(s): \_\_\_\_\_

**Fence**

1. Location: \_\_\_\_\_
2. Height: \_\_\_\_\_ ft.
3. Perimeter Length: \_\_\_\_\_ ft.
4. Material: \_\_\_\_\_
5. Color: \_\_\_\_\_
6. Style: \_\_\_\_\_

**Retaining Wall**

1. Location: \_\_\_\_\_
2. Height: \_\_\_\_\_ ft.
3. Perimeter Length: \_\_\_\_\_ ft.
4. Material: \_\_\_\_\_
5. Color: \_\_\_\_\_

**Driveway**

1. Location: \_\_\_\_\_
2. Perimeter Length: \_\_\_\_\_ ft.
3. Material: \_\_\_ Concrete \_\_\_ Asphalt

**Sidewalk**

1. Location: \_\_\_\_\_
2. Perimeter Length: \_\_\_\_\_ ft.
3. Material: \_\_\_\_\_

**Piers/ Docks/ Sea Walls**

1. Location: \_\_\_\_\_
2. Material: \_\_\_\_\_
3. Perimeter Length: \_\_\_\_\_ ft.
4. Height: \_\_\_\_\_ ft.

**Grading** – Any grading to your property cannot affect property owners adjacent to your lot. If grading will affect adjacent property owners, you are required to obtain signatures from those homeowners prior to beginning work on your project. Please obtain this form from the ACC.

- Front yard  Back yard  Side yard

**Landscape Screening** – Please describe screening in detail. Attached addition page if needed.

- Front yard  Back yard  Side yard

\_\_\_\_\_

**Recreation** – Any recreational equipment must be place behind the home and / or out of view from the street. The use of shrubs to screen the structure is a permitted alternative.

- In-ground pool  Other: \_\_\_\_\_
- Above-ground pool
- Swing set/Playground equipment

*Section 3*

Your application is complete if you have completed the following in details: (please initial)

\_\_\_\_\_ Described improvements on the form including the dimensions of the structure, play structure, improvements, and or fence/retaining wall. You may attach a separate sheet of additional information to assist in the process.

\_\_\_\_\_ Submitted lot survey showing the exact location of the proposed improvements.

\_\_\_\_\_ Attached digital photos of your lot from all four sides.

\_\_\_\_\_ Submitted formal architectural blueprints / landscaping design of your project. These documents must show the precise location of the project on your lot. Sketches on a piece of paper will not be accepted.

\_\_\_\_\_ Attached a sample of paint or stain color to be used. Any changes in the original color submission must be resubmitted to the ACC for approval.

\_\_\_\_\_ For any room additions and storage buildings, you must obtain a construction permit from Coweta County within thirty (30) days of the date of approval by the Architectural Control Committee.

\_\_\_\_\_ Signed the application form.

*Section 4*

**Acknowledgement:**

In an effort to provide and protect each individual homeowner's right and values, it is required that any homeowner or group of homeowners considering improvement (examples retaining walls, additions, out buildings, decks, patios, etc.) on their deeded property other than landscaping, submit a request for home improvement approval to the Architectural Control Committee for approval by the Homeowners Association **PRIOR** to initiating work on planned improvements.

I understand that after this request is approved, if any changes are wanted or needed, a change request form must be submitted for further approval, prior to making the requested change.

I understand that if any changes made that have not been approved, the ACC has the right to ask me, the homeowner, to remove the improvement from the property. I understand that the ACC will act on this request as quickly as possible and contact me in writing regarding their decision. I further understand that no interim updates and status will be given on my application. I AGREE NOT TO BEGIN PROPERTY IMPROVEMENT(S) UNTIL THE ARCHITECTURAL CONTROL COMMITTEE NOTIFIES ME OF THEIR DECISION.

Homeowner Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**RETURN REQUEST FORM TO:**

SHARON KADLICK,  
ACC CHAIRPERSON  
Email: KADDYGSC@NUMAIL.ORG Phone: 678-633-9888

**For Association Use Only**

<b>Date Received</b>	<b>Date Reviewed</b>	<b>Notice of Receipt Letter Sent</b>
<b>Date Notice of Approval Sent</b>	<b>Date Notice of Denial Sent</b>	<b>Date Notice for Request of Additional Information Sent</b>
<b>Date Notice of Meeting Request Sent</b>	<b>ACC Meeting Date</b>	<b>Homeowner Meeting Date</b>
<b>Comments or Contingencies</b>		
<b>Follow-up Notes</b>		
<b>ACC Chair Signature</b>		