

Architectural Review Board (ARB) request form

In accordance with the Association's documents and Architectural Review and Guidelines in the Covenants, Conditions, and Restrictions, I hereby apply for written approval to make the following exterior alterations or changes to my property.

Request Date:					
Owner's Name:		Property Address:	Property Address:		
Home Phone Number: _					
E Mail:					
Date of review fee paym	ent:	Method of payment (circle on	e): Check/money order or online		
	ost often requested appro Other Feature " section		category that matches the nature of your		
□ Roofing					
Brand:	Material:	Color:	Style:		
(A product sample is required	i with this application)				
□ Exterior Color					
	Color # and Name				
		-			
(A color sample is required w	vith this application)				
□ Fencing					
Location:	Type:	Material:	Color:		
Height	Corner L	ot: Yes No Pond Lot	: Yes No		
0			ocations, a picture of the fence type and an		
		within drainage easements is require			
□ Play Equipment/Swi					
Location:		Color:	Canopy Color:		
	Height:		product is required with this application.		
			by the proposed installation for their approval.)		
Decks/Gazebos/Perg	jolas				
Location:			Height at Eaves:		
Height off Ground:	Materi	ial:	d a cross section view of the structure is		
(A lot layout showing the loc	ation of the proposed deck/ga	zebo/pergola along with a picture an	d a cross section view of the structure is		
required with this application	.)				
I Hand Wined Further	may Consustant				
□ Hard Wired Emerge	incy Generators				

Location:

______Size:______Color: ______

(A lot layout showing the location of the proposed generator along with a picture of the generator and the view of the proposed location from the street is required with this application.)



□ Storm Doors/Screened Doors

Location:	Size:	Color:	Material:					
(A lot layout showing the location of the proposed door along with a picture of the door is required with this application.)								
🗆 Landscaning								

□ Landscaping

Tree Type:	Location:	Planting Size:	Mature Size:				
A lot layout showing the location of the proposed tree installation is required with this application)							

□ Hardscapes, including Brick, Stone and Pavers (Patios)

 Location:
 Size:
 Color:
 Material:

 (A lot layout showing the location of the proposed door along with a picture of the door is required with this application.)
 Image: Color:
 Material:

Other Feature

Feature Description: ______ Color:_Size:___Height:Material: _____ (A lot layout showing the location of the proposed feature along with a picture of the item is required with this application.)

Additional Information:

Homeowner Signature: _____

Important Note: Approval by the Architectural Review Committee does not constitute approval by local governing agencies. It is the sole responsibility of the applicant to determine and comply with all governmental regulations, statutes, codes and zoning requirements. It is the responsibility of the applicant to secure any and all permits, inspections, authorization, and/or permission from government agencies prior to work commencement. It is the applicant's sole responsibility to ensure that any work commencing is within the property limits and meetsall building setback and easement restrictions.

It is the applicant's responsibility to protect all elements inside the Association easements, and to return any area disturbed by the installation of a modification to the same standards as previously existed. Upon completion of the improvement, the Association shall review and determine that the installation is in compliance with the approval provided. If the improvements are deemed incomplete or further work is necessitated, applicant shall be provided with a deadline for the completion of the work. If the improvements are not completed to the satisfaction of the Association within the timelines provided, the Association may impose penalties until completion occurs. All Architectural Review Board Request Forms will be reviewed by the Board of Directors or their designees.

A review fee of \$ 45.00 is required for each request. If your application requires extensive review, input from legal or professional services, or otherwise requires extraordinary time or resources to render a decision, additional fees may apply. Applicants will be notified of extra fees before they are incurred. The review fee can be paid by online by clicking on the link below or by mailing a check or money order made payable to **Meridian Place Home Owners Association** to the address listed below.

Send Request To:

Meridian Place Home Owners Association IMC Charleston 1 Carriage Lane, Building C Charleston, SC 29407 Phone: (843) 297-8590 Fax: 843-952-7192 Email: windee@imcchs.com