

## APPLICATION FOR ARCHITECTURAL REVIEW

Heron's Ridge Homeowner's Association, Inc.  
5849 Harbour View Blvd., Suite 200  
Suffolk, VA 23435  
(757) 484-0706  
(757) 484-3217 fax

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

Owner: \_\_\_\_\_

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

Telephone: H \_\_\_\_\_ W \_\_\_\_\_

In accordance with the Architectural Guidelines, I/We are requesting approval for the following described alteration/change/addition, and have enclosed the documents designated below:

Description of alteration/change/addition:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Plans and Specifications including type of materials to be used.

\_\_\_\_\_ Survey, Site Plan or Plot Plan showing location of addition or alteration on lot/in relation to existing structures.

\_\_\_\_\_ Illustration of any new or replacement components such as windows, doors, lighting, gutters etc.

\_\_\_\_\_ Description of plantings/trees to be removed or added.

\_\_\_\_\_ Copy of Elizabeth City Building and Zoning Permits.

\_\_\_\_\_ Photograph/Drawings

\_\_\_\_\_ Other

I/we understand that I/we must wait for written approval before beginning the foregoing alteration and that approval by the Architectural Review Board does not release us of our obligation to ensure that the alteration is in compliance with the applicable Building and Zoning Ordinances for the City of Elizabeth City.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**APPLICATION FOR ARCHITECTURAL REVIEW – Page 2**

Architectural Review Board:

The request as described above is **approved**.

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Signature

Date

The request as described above is **approved with the following conditions:**

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Signature

Date

The request as described above is **denied**.

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Signature

Date