

**Matthews Grove Homeowners Association**  
Request for Architectural Approval

Name: \_\_\_\_\_ Request Date: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

What Is the estimated Start Date? \_\_\_\_\_ Completion Date? \_\_\_\_\_

- Type Of Modification:
- |  |                                   |                                     |
|--|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Fence             | <input type="checkbox"/> Porch    | <input type="checkbox"/> Deck/Patio |
| <input type="checkbox"/> Utility Building  | <input type="checkbox"/> Pool     | <input type="checkbox"/> Garage     |
| <input type="checkbox"/> Exterior Painting | <input type="checkbox"/> Addition | <input type="checkbox"/> Carport    |
| <input type="checkbox"/> Other: _____      |                                   |                                     |

Location: \_\_\_\_\_

Size: \_\_\_\_\_

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

Materials: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

**Please read and follow these instructions carefully:**

1. Attach a detailed description of improvements including:
  - Location, Size, Color, Material, Contractor (if applicable), Plans/Drawings
2. **Attach copy of Property Survey, with proposed changes/additions shown.**
3. Please include one copy of your request and one copy of all supporting documentation.
4. E-mail requests cannot be accepted. Please mail your request and supporting documentation to:

**Matthews Grove Homeowners Association**  
**P.O. Box 11906**  
**Charlotte, NC 28220**

**Please Note:**

- Complete one form per change (ex. One request for a garage and one request for a fence). Multiple requests can be mailed in the same envelope.
- A copy of the Property Survey **must** be included for each request or the request will be returned.
- Committee reserves the right to request more information to clarify the request.
- Please allow 3-4 weeks for the approval process.

**Committee Use Only**

Approved

Denied Reason for Denial: \_\_\_\_\_

\_\_\_\_\_  
(Name of Committee Member)

\_\_\_\_\_  
(Signature Of Committee Member)

\_\_\_\_\_  
(Date)