

**GOOSE CREEK HOME OWNERS ASSOCIATION
ARCHITECTURAL CONTROL COMMITTEE (ACC) REQUEST FORM**

PO Box 12412, Tallahassee, FL 32317 – 850 583-1173

Property Owner Information:

Name: _____ Phone: _____

Address: _____ Email: _____

Please check appropriate box for modification:

Roof Shingle color: _____ Manufacturer: _____

MUST BE ARCHITECTURAL STYLE SHINGLE

Fence Locations facing green space/county park **MUST BE 4'**

Exterior Painting – Please list one color below for each location and attach paint sample for each color.

We are unable to accept scanned paint colors

Exterior Wall Color:	Door Color:
Trim Color:	Garage Door Color:
Shutter Color:	Other Color: _____ Location: _____

Deck (Submit plans)

Structural Addition (submit plans)

Screened Porch (submit plans)

Other (submit plans)

Please submit a site plan or survey with a drawing showing where the project will be located, in reference to the setbacks of property lines. include the amount of each setback for the rear, front and sides of property lines. Photos, drawings, proposals or brochures of your proposed project may also be submitted with this request for clarification of the materials.

DESCRIPTION OF MODIFICATION FOR ALL REQUESTS

Include nature, kind, shape, height, materials and location of all requests and any other comments:

Contractor(s): _____

Estimated Start Date: _____ Scheduled Completion Date: _____

1. I assume all liability and will be responsible for all damage and/or injury which may result from performance of this work.
2. I will be responsible for the conduct of all persons, agents, contractors, and employees who are connected with this work.
3. I will be responsible for complying with, and will comply with, all applicable federal, state, and county laws; codes; regulations; and requirements in connection with this work, and I will obtain necessary governmental permits and approvals for the work.

Property Owners Signature: _____ Date: _____

Property Management

Date received: _____

Date sent to ACC: _____

Date sent to property owner: _____

ACC Review Members Decision

Approved Denied Initial _____ Date: _____

Approved Denied Initial _____ Date: _____

Approved Denied Initial _____ Date: _____

Final Decision: Approved Denied