The Heritage @ Dunes West Townhome Association

Request Home Improvement or Modification

Items 1 through 8 are to be completed by the homeowner.

1. Name of Homeowner _____ 2. Date of Request _____

3. Address _____ 4. Telephone _____

EMAIL: _____

5. Description of Request _____

_____

6. **Submittal must include pictures, sketch/drawing or elevation plans of modification**.

7. Requested start date _____ 8. Approximate completion date _____

PLEASE ALLOW 30 DAYS FOR PROCESSING THIS REQUEST

Below to be completed by The ARB

Date ARB received request _____

- □ APPROVED without conditions
- □ APPROVED with the following CONDITIONS:

_____

_____

- □ ADDITIONAL INFORMATION REQUIRED

_____

_____

- □ NOT APPROVED for the following REASON:

_____

_____

ARB Signature(s) _____

Date of ARB action _____ Date Homeowner Notified _____

Mail completed form to The Heritage @ Dunes West TH's, 1340-G Ben Sawyer Blvd, Mt. Pleasant, SC 29464 or email to molly@charlestonpms.com