

SKYECROFT ARCHITECTURAL REVIEW
SUBMITTAL FORM ONE – MAJOR PROJECTS SCHEMATIC AND DESIGN
DEVELOPMENT REVIEW
 (ONE PAGE)

Submit this form and fees to initiate your Schematic Review
Incomplete forms or forms submitted without payment will not be accepted

SUBMIT THIS FORM ONLY, TO:
SKYECROFT HOMEOWNERS ASSOCIATION, INC.
(YOU WILL BE NOTIFIED BY E-MAIL HOW TO MAKE FUTURE SUBMITTALS)

COMPLETE THE FOLLOWING:

Lot Number: _____ Lot Street Address: _____

Participating Builder Name (primary contact): _____

Participating Builder e-mail address: _____

Participating Builder Cell Phone: _____

Lot Owner (if different): _____

Lot Owner e-mail address: _____

Lot Owner Cell Phone _____

Owner Mailing Address _____

City _____ ST _____ Zip _____

ALSO, CONFIRM THE FOLLOWING WHERE APPLICABLE:

I * Initials _____	Homeowner's fees paid to HOA for current year.	Enter Amount _____
II * Initials _____	Main dwelling Architectural Review. See Article 3.3 for amount	Enter Amount _____
III ** Initials _____	Compliance Security Deposit. See Article 3.5 and 3.51 for amount	Enter Amount _____
IV * Initials _____	Other Review fee. See Article 3.3 for amount	Enter Amount _____
		Total Enclosed _____

* Required to be paid with the initial Submittal for any new dwelling.
 ** 20% will be retained by the HOA to cover non-specific wear and tear
 Checks should be made payable to Skycroft HOA.

**OWNER AND BUILDER ACKNOWLEDGE THAT THEY HAVE READ AND AGREE TO CONFORM TO
 THE SKYECROFT ARCHITECTURAL GUIDELINES IN THE EDITION DATE NOTED BELOW :**

Lot Owner _____ Date: _____

Builder _____ Date: _____

Association Manager confirms receipt of fees: _____ Date: _____ Print Name: _____

Fees Paid by: _____ Total Amount Paid: _____

Skycroft Homeowners Association Architectural Guidelines - April 2020 Edition
*GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON
 SUBMITTAL FORMS ONE OR MINOR PROJECTS APPLICATION FORM*