

FOR EACH ITEM NAME THE MANUFACTURER, WITH COLOR/FINISH AND STYLE IF KNOWN

**SKYECROFT ARCHITECTURAL REVIEW**  
**SUBMITTAL FORM THREE**  
(TWO PAGES)

**REQUEST FOR ON-SITE REVIEWS**

*(you will use this form three times during the course of construction)*

**1. PRE-CONSTRUCTION ON-SITE REVIEW:**

A PRE-CONSTRUCTION REVIEW MUST BE SCHEDULED TEN (10) BUSINESS DAYS IN ADVANCE AND APPROVAL TO PROCEED MUST BE ISSUED PRIOR TO BEGINNING ANY CONSTRUCTION (SEE “SKYECROFT ARCHITECTURAL GUIDELINES”).

STAKING OF THE OUTLINE OF THE HOME WITH STRING LINES ALONG MAJOR WALLS; SAMPLE BOARD OR MATERIALS ON SITE AS DESCRIBED IN ARTICLE 3.10.1; A RIBBON INDICATING THE PROPOSED LOCATION OF THE SILT FENCE; CONSTRUCTION FENCING; TREE PROTECTION AND STONE CONSTRUCTION DRIVE MUST BE IN PLACE **PRIOR** TO BEGINNING ANY CONSTRUCTION ACTIVITIES OR REQUESTING THIS REVIEW. THE MOST IMMEDIATE CATCH BASIN DOWN STREAM OF ANY HOME WHERE BARE EARTH IS EXPOSED DUE TO WORK, EITHER NEW CONSTRUCTION OR MAJOR LANDSCAPE MODIFICATIONS SHALL HAVE FILTER FABRIC PLACED IN THE CATCH BASIN BY THE SKYECROFT HOA PRIOR TO EXPOSING THE EARTH, EXCEPT WITH APPROVAL OF THE ARC. THIS IS IN ADDITION TO THE REQUIREMENT FOR SILT FENCES.

***When submitting this form requesting the on-site review, the contractor must upload to the review site all items required under Article 7.1G (notably, insurance endorsements, a copy of the contract for construction and the attachment to Form Four)***

\_\_\_\_\_  
Signature of Person Requesting Review who read notices above.      Date

**NOTE THAT FOR THE SITE STAKING REVIEW REQUEST, THE NEXT PAGE IN THESE GUIDELINES NEEDS TO BE COMPLETED AND SUBMITTED ALONG WITH THE ATTACHMENTS NOTED.**

**2. REVIEW AT DRY-IN:**

AT THE POINT THAT THE HOME HAS ROOFING, WINDOWS AND EXTERIOR DOORS INSTALLED AND HOUSE WRAP IN PLACE, THE OWNER OR BUILDER SHALL REQUEST THE REVIEW COMMITTEE TO CONDUCT THE DRY-IN REVIEW. THE REVIEW WILL BE SCHEDULED AS SOON AS PRACTICAL BY THE REVIEWERS. CONSTRUCTION SHOULD CONTINUE WITHOUT REGARD TO THE TIMING OF THE ON-SITE REVIEW.

***When submitting this form requesting the dry-in review, the contractor must upload to the review site the landscape plan.***

\_\_\_\_\_  
Signature of Person Requesting Review who read notices above.      Date

**3. FINAL REVIEW:**

UPON COMPLETION OF THE HOME AND ALL LANDSCAPING AND FEATURES, THE OWNER OR BUILDER SHALL REQUEST A FINAL REVIEW. THIS REVIEW WILL BE PERFORMED TYPICALLY WITHIN TWO WEEKS OF THE REQUEST. THE REVIEW WILL BE MADE WITH RESPECT TO SITE CLEAN-UP AND WILL RESULT IN APPROVAL OF ANY DEPOSIT MONIES THAT ARE TO BE REFUNDED.

\_\_\_\_\_  
Signature of Person Requesting Review:      Date

**Skyecroft Homeowners Association Architectural Guidelines - 2021 Edition**  
**GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON SUBMITTAL FORMS ONE OR MINOR PROJECTS APPLICATION FORM**

UPLOAD THIS FORM TO THE SAME SITE AS YOUR APPLICATION EACH TIME YOU WISH TO  
SCHEDULE AN ON SITE EVALUATION.

(SUBMIT THIS FORM DIGITALLY)

**ATTACHMENT TO SUBMITTAL FORM THREE  
CONTRACTOR INFORMATION**

**THIS FORM IS REQUIRED TO ACCOMPANY THE SITE STAKING REVIEW REQUEST**

GENERAL CONTRACTOR (LEGAL NAME): \_\_\_\_\_

NORTH CAROLINA LICENSE NUMBER: \_\_\_\_\_ LICENSE TYPE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONES(S): \_\_\_\_\_ E-MAIL \_\_\_\_\_

NAME OF ON SITE SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

HVAC CONTRACTOR: \_\_\_\_\_

NORTH CAROLINA LICENSE NUMBER: \_\_\_\_\_ LICENSE TYPE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONES(S): \_\_\_\_\_ E-MAIL \_\_\_\_\_

NAME OF ON SITE SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

ELECTRICAL CONTRACTOR: \_\_\_\_\_

NORTH CAROLINA LICENSE NUMBER: \_\_\_\_\_ LICENSE TYPE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONES(S): \_\_\_\_\_ E-MAIL \_\_\_\_\_

NAME OF ON SITE SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

PLUMBING CONTRACTOR: \_\_\_\_\_

NORTH CAROLINA LICENSE NUMBER: \_\_\_\_\_ LICENSE TYPE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONES(S): \_\_\_\_\_ E-MAIL \_\_\_\_\_

NAME OF ON SITE SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

LANDSCAPE CONTRACTOR: \_\_\_\_\_

NORTH CAROLINA LICENSE NUMBER: \_\_\_\_\_ LICENSE TYPE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONES(S): \_\_\_\_\_ E-MAIL \_\_\_\_\_

NAME OF ON SITE SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

**NOTE: ALL WORK OF THE PROJECT IS TO BE PERFORMED BY OR UNDER CONTRACT  
WITH THE PARTICIPATING BUILDER, INCLUDING PRIME SUBCONTRACTORS NOTED  
ABOVE. (SEE ARTICLE 7.1)**

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SUBMITTAL FORMS ONE OR MINOR PROJECTS APPLICATION FORM