

SKYECROFT CHECKLISTS

SCHEMATIC DESIGN CHECK LIST: *Provide this page with your SD submittal. Confirm that you have included each item below by initialing beside each required document.*

- A copy of Form One-Major Project Schematic Review that was submitted to the Association Manager.
- A copy of the Site Survey as described on the Site Survey Check List.
- Floor plans showing heated and unheated square footage.
- A roof plan indicating pitch.
- A minimum of four elevations with elevations adapted to the topography of the site.
- A copy of this page of the Guidelines with your initials on the lines to the left.
- On each drawing provide architect or designer name, email address and phone number.
- Submit fees denoted in 3.3 (Form One) to Association Manager with checks made to Skycroft HOA

SUBMITTED BY: (print name) _____

POSITION (Owner or Contractor) _____

SITE SURVEY CHECK LIST: The following information is required to be on your lot survey: *Your lot survey should be submitted along with a copy of this list with your Schematic review and with the DD or CD review if changes are made after the Schematic Review.*

SHOW ON THE PLAN:

- _____ Skyecroft infrastructure to include all improvements, roads, ponds, utilities on or immediately adjacent to subject property. Identify the recorded plat and lot number.
- _____ Property lines with dimensions and bearings and a north arrow.
- _____ Streets, setbacks, right of ways, easements, utility stub-outs, flood zones and all other pertinent information from recorded documents.
 - _____ The proposed site plan should show neighboring dwelling frontage for comparison.
- _____ Outline (footprint and eaves) of the proposed home, porches, steps, patios, walkways and driveway(s).
- _____ Contours at two-foot increments. Illustrate elevation above sea level and show benchmark referenced to some 'called' point on site that will remain undisturbed. Show existing contours as dashed lines and number the contours with an elevation designation every ten feet of change.
- _____ Show proposed finished contours with solid lines.
- _____ All existing hardwood trees with a caliper of 6" or greater and all existing Pines with diameter of 30 inches or over.
- _____ Scale to be 1/8" = 1'-0" or 1" = 10ft.
- _____ Outline of the most proximate side and forward most feature of any home on an adjacent lot.
- _____ Distance of the home most immediately across the street from the road curb to forward most feature of the home.
- _____ Total planned footprint of the home on the site and total square footage of the site.
- _____ Seal of the licensed surveyor with a signature and date.

The surveyor shall release drawing for use and provide a digital copy for the SARC review.

DESIGN DEVELOPMENT (DD) CHECKLIST: Use the following as your check list, initial each and upload this page with your submittal

A completed Skyecroft Form Two in digital format. Indicate all finished materials to be used as manufacture and style.

A completed Contractor Reference Form Four in digital format (new Builder only)

Design Development Floor Plans and Elevations in digital format including:

- i. Floor plan: Indicate all rooms, and sizes, along with square footage of the total heated area and square footage of unheated area. Note method of SF calculation. Show the finished floor elevation (FFE) of the first floor.
- ii. Roof plan indicating slopes and finish materials.
- iii. Elevations: Provide front, rear, and side elevations indicating building materials and finishes. Elevations to be site adapted showing correct location of grade with respect to the topography.
- iv. A fully detailed wall section from foundation to roof and through a window, showing all significant elements of construction including flashing, air, and water barriers.
- v. A transverse and longitudinal section through the front entry and front door.
 - Additional key details needed to clarify significant features of the design.

Design Development Site Plan if changes are made to original submittal.

Tree survey. Denote trees to be removed which are more than 20 feet outside of the perimeter of the home.

Photographs in digital formats documenting pre-existing damage to roads and curbs and drainage ditches.

The SARC reserves the right to require the submittal of other information, data, drawings, and samples as deemed necessary. Submit all required items as directed by the Association Manager.

Include any request for a Variance at this time. Typically, a Variance is granted only in cases of hardship related to site constraints that may dictate conditions of the design that conflict with Guideline requirements.

- A variance request is attached _____yes_____no.

Submit Form Two-Major Projects Design Development Review to the Review Site.

A copy of this page with your initials on the lines to the left and item

Submit Major Projects Submittal Form Three to the Review Site. Denote Design Development Review.

Other data: The SARC reserves the right to require the submittal of other information, data, drawing and samples as deemed necessary.

CONSTRUCTION DOCUMENT (CD) CHECKLIST: Use the following as your check list, initial each and upload this page with your submittal

(Use the following as your check list, initial each and upload this page with your submittal)

A copy of Major Projects Submittal Form Three, indicating this is a Construction Document Review.

A copy of this page with your initials on the lines to the left.

Floor plans: Indicate all rooms, and sizes, along with square footage of the total enclosed living area. Show the finished floor elevation (FFE) of the first floor. Submittals without indicating finished floor elevation (FFE) of the first floor may delay the review. (See 3.4.1 for Foundation Survey submittal requirements)

Roof plan: Indicate slopes, pitches, hips and gables and materials of construction.

Elevations: Provide front, rear, and side elevations showing building materials and finishes. Indicate maximum height of the principal structure and anticipated finished grades. Show elevations corrected with respect to adjacent grade. Indicate floor to floor heights.

Typical Wall Sections: The sections should be made in locations that show typical foundation to roof conditions. (Two or more wall sections may be required) Indicate foundation condition, building materials, roof overhang, fascia, and decorative elements & other details as needed to convey the design. Ceiling heights must be indicated for all levels of the home. One wall section must be cut through a typical window and a typical door.

Details: Provide details of all unique conditions on the home.

Construction Document Site Plan in digital format. Note all features on the site which will be seen on the exterior of the home.

Curb elevation and elevation at rear property line should be clearly denoted.

Detailed Landscaping Plan in digital format, CAD or equivalent **HANDWRITTEN SKETCHES WILL NO LONGER BE ACCEPTED** (Minimum scale: 3/32" = 1'-0" or 1" = 10', minimum sheet size 24"x36"), including site grading, and showing location, size, species, quantity, spacing, and quality of all plant material, protection of existing vegetation and other landscaping details shall be submitted for approval prior to the completion of construction. Extent of the planting beds shall be noted as well. Submit this drawing prior to or at the Dry-In review to avoid an additional review fee.

Drainage Plan in digital format (Minimum scale: 3/32" = 1'-0" or 1" = 10', minimum sheet size 24"x36"), showing the location of erosion control devices and the direction of storm water flow.

Samples in digital format of all exterior materials and finishes, including paint colors, siding materials, roofing, shutters, medallions, chimneys, doors, lighting, and all other materials that will be seen on the exterior of the home and site.

EXPECTED START _____ EXPECTED DRY-IN _____ EXPECTED FINAL _____

Other data: The SARC reserves the right to require the submittal of other information, data, drawing and samples as deemed necessary.

**SKYECROFT ARCHITECTURAL REVIEW
MINOR PROJECT APPLICATION**

Submit this form for Minor Projects (only)

**SUBMIT THIS FORM ONLY, TO:
SKYECROFT HOMEOWNERS ASSOCIATION, INC.**

**FORMS WITHOUT APPROPRIATE FEES WILL NOT BE ACCEPTED
CHECKS SHOULD BE MADE TO SKYECROFT HOA**

**REGISTRANTS WILL BE NOTIFIED BY E-MAIL HOW TO MAKE SUBMITTALS.
All submittals will be digital and must be uploaded to the ARC review site**

COMPLETE THE FOLLOWING:

Lot Number: _____ Lot Street Address: _____
Registrant Name (primary contact): _____
Registrant e-mail address: _____
Registrant Cell Phone: _____
Lot Owner (if different): _____
Lot Owner e-mail address: _____

_____ Application is for Part A Minor Project. See Article 3.3 for amount of fee.

For Patios and Fireplaces also provide the name of the Contractor and a copy of their license

_____ Application is for Part B Minor Project. Fee in the amount of \$75.

00

**OWNER ACKNOWLEDGE THAT HE/SHE HAS READ AND AGREE TO CONFORM TO THE
SKYECROFT ARCHITECTURAL GUIDELINES IN THE EDITION DATE NOTED BELOW.**

Lot Owner Signature _____ Date: _____

Once you are logged onto the review site, upload a description of your proposed work or a graphic to the review site. The review period may take up to ten (10) business days. The registrant will be notified by email from the review site of the ARC determination.

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 Admin & Architectural Review. See Article 3.3	Enter Amount _____
III * Initials	_____ Road & Impact Use Fee. 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. 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 - 2021 Edition
*GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON
 SUBMITTAL FORMS ONE OR MINOR PROJECTS APPLICATION FORM*

SKYECROFT ARCHITECTURAL REVIEW

SUBMITTAL FORM TWO - MAJOR PROJECTS

This form is required to be submitted with drawings at both the Design Development and Construction Document Reviews

(TWO PAGES FOR DESIGN DEVELOPMENT - THIRD PAGE ADDED FOR CONSTRUCTION DOCUMENTS)

This submittal is for _____ Design Development Review _____ Construction Document Review

_____ I am acknowledging inclusion of page 9 from the Architectural Guidelines with this form for my Design Development Submittal.

Or

_____ I am acknowledging inclusion of page 10 from the Architectural Guidelines with this form and the third page of this form for my Construction Document Submittal.

ALL INFORMATION, INCLUDING THIS FORM MUST BE SUBMITTED DIGITALLY AS A PDF, TIFF OR JPEG.

DATE OF THIS SUBMITTAL _____

Lot Number: _____ Property Address: _____

GENERAL CONTRACTOR IF KNOWN: _____

NORTH CAROLINA LICENSE NUMBER: _____ LICENSE TYPE _____

MAILING ADDRESS _____

CITY _____ ST _____ ZIP _____

PHONE(S) _____

EMAIL ADDRESS: _____

ARCHITECT/DESIGNER _____

NORTH CAROLINA LICENSE NUMBER INDIVIDUAL: _____

MAILING ADDRESS _____

CITY _____ ST _____ ZIP _____

PHONE(S) _____

EMAIL ADDRESS: _____

ARCHITECT/ DESIGNER HAS GIVEN APPROVAL FOR THE USE OF THIS PLAN ON THIS SITE AND FURTHERMORE HAS GIVEN PERMISSION FOR THE SARC TO COPY THEIR WORK FOR ITS USE: YES _____ NO _____

HEATED SQ. FT.: 1ST FLOOR _____ 2ND FLOOR _____

BASEMENT _____ OTHER _____

SUBTOTAL (Heated) _____

UNHEATED SQ. FT.: SUBTOTAL (Under Roof) _____

TOTAL SQ. FT. (ADD SUBTOTALS) (Under Roof) _____

TOTAL HEATED SF WAS MEASURED BY _____ NC Real Estate Guides _____ IBC STANDARDS, (see Article 5.2)

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OPEN DECK? YES NO	QUANTITY:	TOTAL SQ. FT.: _
PATIO? YES NO	QUANTITY:	TOTAL SQ. FT.: _
COVERED PATIO YES NO	QUANTITY:	TOTAL SQ. FT.: _

EXTERIOR MATERIALS: (Specify website for Manufacturer, Color and Style or Pattern for all that apply. If website is not available, provide a digital photograph of proposed material taken in normal daylight)

BRICK: _	_____	COLOR _____	STYLE _____
STONE:	_____	COLOR _____	STYLE _____
STUCCO:	_____	COLOR _____	STYLE _____
SIDING:	_____	COLOR _____	STYLE _____
OTHER:	_____	COLOR _____	STYLE _____
ROOF:	_____	COLOR _____	STYLE _____
WINDOWS:	_____	COLOR _____	STYLE _____
TRIM:	_____	COLOR _____	STYLE _____
DOORS:	_____	COLOR _____	STYLE _____
SHUTTERS:	_____	COLOR _____	STYLE _____
DRIVEWAY:	_____	COLOR _____	STYLE _____
DRIVEWAY APRON:	_____	COLOR _____	STYLE _____
OTHER:	_____	COLOR _____	STYLE _____
GARAGE DOOR:	_____	COLOR _____	STYLE _____

(Front Loading Not Permitted)

FIREPLACE: _____ CHIMNEY _____

UNVENTED GAS FIREPLACES AND EXPOSED METAL STACKS OR EXPOSED SPARK ARRESTORS ARE NOT PERMITTED.

EXTERIOR MATERIALS: (Specify website for Manufacturer, Color and Style or Pattern for all that apply. Also upload to the review site at the Construction Document review a digital photograph of proposed material taken in normal daylight or a picture from the manufacturer’s website for each material above)

THE UNDERSIGNED CERTIFIES THAT HE/SHE WILL OBTAIN, PRIOR TO THE START OF CONSTRUCTION ACTIVITIES, BUILDING AND ZONING PERMITS ISSUED BY THE AUTHORITY HAVING JURISDICTION.

I acknowledge that I have completed and included everything on this checklist prior to submitting for architectural review. I understand that this information has been requested by the SKYECROFT Homeowners Association prior to my obtaining bank loans or building permits.

Lot Owner Signature

Date

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SKYECROFT ARCHITECTURAL REVIEW

SUBMITTAL FORM TWO (Continued)

Complete this page and upload for the Construction Document Review

INTERIORMATERIALS:

Flooring in foyer and halls: _____ COLOR: _____ STYLE _____

Flooring in family room: _____ COLOR: _____ STYLE _____

Flooring in Bedrooms: _____ COLOR: _____ STYLE _____

Flooring in Kitchen: _____ COLOR: _____ STYLE _____

Flooring in Utility areas _____ COLOR: _____ STYLE _____

Rooms with cornice trim: _____

Door Hardware: _____ FINISH: _____ STYLE _____

Interior Door: _____ FINISH: _____ STYLE _____

Door and window casing: Width: _____ FINISH: _____ STYLE _____

Kitchen Cabinets _____ FINISH: _____ STYLE _____

Kitchen Counter tops: _____ FINISH: _____

Bathroom Cabinets _____ FINISH: _____ STYLE _____

Bathroom Counter tops: _____ FINISH: _____

Custom Cabinetry: _____ FINISH: _____ STYLE _____

Rooms with exposed beams or special ceilings: _____

Kitchen Appliances: _____ COLOR: _____ STYLE _____

Refrigerator: _____

Oven: _____

Is range hood vented to the outside? _____

Fireplace: _____ FINISH on mantel _____

Manufacturer of faucets and plumbing hardware: _____

Confirm if the home has the following:

Was the home designed to meet any Green Energy Standards? _____

Special AV or sound system: _____ Energy Management System: _____ SEER rating on HVAC: _____

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

SKYECROFT ARCHITECTURAL REVIEW SUBMITTAL FORM THREE – REQUEST FOR ONSITE REVIEWS

(TWO PAGES)

(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 LANSCAPING 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

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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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SKYECROFT ARCHITECTURAL REVIEW
SUBMITTAL FORM FOUR – REVIEW
AT SITE STAKING
(ONE PAGE)

1. **Lot Number:** _____ **Inspection Date:** _____ **Time:** _____
2. **Street Address:** _____
3. **Homeowner:** _____
4. **Builder:** _____

Site and Home Staked? _____

Water Meter: Condition of cover and piping: _____

Type of protection: _____

Sewer System: Condition of cover and piping: _____

Type of protection: _____

Silt Fence Condition: Road Side _____

Interior property lines _____

Condition of Stone for driveway and location of dumpster/port-a-potty, site trash:

Sample Board: Materials on board or otherwise on site? If No, a separate review will be required at an additional expense:

General Condition of Roadway and Curbs:

Electrical and Water Service to the site:

Existing Tree Protection : _____

Building Permit Posted: (Name Contractor)

NOTES: **Builder / Homeowner** are responsible for maintaining site: **Builder/Homeowner** shall keep roadway clean of all debris. Roadways are to be swept clean by 5:00 PM each Friday. If not maintained **SARC** will have roadways cleaned and bill will be sent to the **homeowner**. Building materials delivered to the site: If building materials delivered to the site spill onto roadway it is the responsibility of delivery company/ **Builder/homeowner** to clear materials from roadway. If not cleared from roadway after notification by community management, **SARC** will have roadway clean and bill the **homeowner**. Requirements for neighboring sites: **Homeowner/Builder** must have written approval to place the following on adjoining properties: Dumpster, building materials, construction equipment, vehicle parking and landscaping materials. Damage to neighboring property will be responsibility of **homeowner** under construction to make necessary repairs to bring impacted property back to pre-construction condition.

Signatures: (note: representative required on site at time of review)

Homeowner: _____ **Date:** _____

Builder: _____ **Date:** _____

SARC: _____ **Date:** _____

Photos on file? YES NO

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SKYECROFT ARCHITECTURAL REVIEW

SUBMITTAL FORM FIVE - REVIEW AT DRY-IN

1. Lot Number: _____ Inspection Date: _____ Time: _____
2. Street Address: _____
3. Homeowner: _____
4. Builder: _____

Curbing: Any damage due to new construction: _____

Water Meter: Condition of cover and piping: _____

Type of protection: _____

Sewer System: Condition of cover and piping: _____

Type of protection: _____

Silt Fence Condition: Road Side _____

Interior property lines _____

Condition of Stone for driveway and location of dumpster/port-a-potty, site trash:

Sample Board: Materials on home same as board? If No, explain: _____

General Condition of Roadway: Needs cleaning and/or other: _____

Building materials stored: If on neighboring property is permission authorized? If No, explain: _____

Exterior Home Massing and Details as approved: If no, explain: _____

Landscape Elements as approved: If no, or plan not yet submitted, explain: _____

Signatures: (note: representative required on site at time of review)

Homeowner: _____

Builder: _____ Date: _____

SARC: _____ Date: _____

Photos on file? YES. NO

Skyecroft Homeowners Association Architectural Guidelines - 2021 Edition

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**SKYECROFT ARCHITECTURAL REVIEW
SUBMITTAL FORM SIX – FINAL REVIEW**

1. **Lot Number:** _____ **Inspection Date:** _____ **Time:** _____
2. **Street Address:** _____
3. **Homeowner:** _____
4. **Builder:** _____

Curbing and Road: Note all damage, compare to original: _____

Water Meter: Condition of cover and piping: _____

Type of protection: _____

Sewer System: Condition of cover and piping: _____

Type of protection: _____

Silt Off Site?: _____

Condition of Stone for driveway and location of dumpster/port-a-potty, site trash: All removed?

Sample Board: Materials on home same as board? If No, explain: _____

Building materials stored: If on neighboring property was property restored?

Exterior Home Massing and Details as approved: If no, explain:

Landscape Elements as approved: If no, explain:

Repair of neighboring property where used during the construction process? _____

Mailbox installed? _____

Signatures: (note: representative required on site at time of review)

Homeowner: _____ **Date:** _____

Builder: _____ **Date:** _____

Are there any outstanding claims with the contractor's insurance company with respect to community property pending resolution? If yes, explain: _____

Is Security Deposit Authorized for release? Explain YES or NO: _____

SARC: _____

Date: _____

Photos on file? YES NO

SKYECROFT ARCHITECTURAL REVIEW

SUBMITTAL FORM SEVEN PARTICIPATING CONTRACTOR APPLICATION FOR NEW APPLICANTS ONLY

COMPANY NAME: _____ License #: _____
QUALIFIER NAME: _____ License #: _____
COMPANY LICENSE TYPE: _____ COMPANY LICENSE LIMIT: Unlimited (only option)

CONFIRM (initial after each):

- INSURANCE ENDORSEMENTS ARE INCLUDED HEREIN, PER ARTICLE 7 _____
- FINANCIALS ARE PROVIDED HEREIN, PER ARTICLE 7 _____
- BUILDER AGREES TO WORK COOPERATIVELY WITH THE SARC IN MEETING GUIDELINE REQUIREMENTS AND RESOLVING ANY VIOLATIONS THAT MAY OCCUR. _____
- BUILDER HAS PROVIDED THE INFORMATION REQUIRED IN ARTICLE 7.1.C. _____
- BUILDER AGREES TO FOLLOW SKYECROFT CC&R'S, CURRENT GUIDELINES AND PATTERN BOOK _____.

PROVIDE DETAILED INFORMATION WITH RESPECT TO HOMES THAT YOU HAVE COMPLETED UNDER YOUR CURRENT CORPORATE STRUCTURE THAT ARE SIMILAR IN SIZE AND SCOPE TO HOMES IN THE SKYECROFT COMMUNITY. (PROVIDE SEPARATE EXPLANATION IF STRUCTURE CHANGED)

HOME NUMBER ONE:

1. Contact: _____
2. Telephone: _____
3. Physical Address: _____
4. Total Heated Space: _____
5. Year Completed: _____
6. Number of months under construction: _____
7. Total delivered price of the home: _____

HOME NUMBER TWO:

8. Contact: _____
9. Telephone: _____
10. Physical Address: _____
11. Total Heated Space: _____
12. Year Completed: _____
13. Number of months under construction: _____
14. Total delivered price of the home: _____

HOME NUMBER THREE:

15. Contact: _____
16. Telephone: _____
17. Physical Address: _____
19. Year Completed: _____
20. Number of months under construction: _____
21. Total delivered price of the home: _____

ATTESTED TO: _____ Title: _____

Signature: _____ Date: _____

UPLOAD THIS FORM IN DIGITAL FORMAT TO THE SARC SITE AS DESCRIBED IN ARTICLE 7

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SKYECROFT ARCHITECTURAL REVIEW

SUBMITTAL FORM EIGHT POOL APPLICATION - FORM EIGHT

CONFIRM (initial after each):

- INSURANCE ENDORSEMENTS ARE INCLUDED HEREIN, PER THE GUIDELINES _____
- BOND HAS BEEN SUBMITTED TO MANAGEMENT COMPANY IN THE AMOUNT OF \$1,000.00 _____
- VENDOR AGREES TO WORK COOPERATIVELY WITH THE SARC IN MEETING GUIDELINE REQUIREMENTS AND RESOLVING ANY VIOLATIONS THAT MAY OCCUR. _____
- VENDOR HAS PROVIDED THE INFORMATION REQUIRED IN ARTICLE 10. _____
- VENDOR AGREES TO FOLLOW SKYECROFT CC&R'S, CURRENT GUIDELINES AND PATTERN BOOK _____

COMPLETE THE FOLLOWING:

Lot Number: _____ Lot Street Address: _____

Pool Contractor (primary contact): _____

Pool Contractor e-mail address: _____

Pool Contractor 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 _____	Pool Submittal Fee (\$500 for Pool or \$700 with Structure)	Enter Amount _
III ** Initials _____	Compliance Security Deposit/Bond (\$1000).	Enter Amount _
		Total Enclosed _

* Required to be paid with the initial Submittal ** 50% may be retained by the HOA to cover non-specific wear and tear
Checks should be made payable to Skyecroft HOA. In the event that no maximum time period is specified in the approval or any other agreement, construction shall be complete within six (6) months from the date of approval. If construction is not completed on a project within the period set forth in the approval or within six (6) months, or within any extension approved by the SARC, the approval shall be deemed withdrawn and the incomplete construction shall be deemed to be in violation of the CC&Rs and these Guidelines.

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

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

Lot Owner _____ **Date:** _____

POOL VENDOR _____ **Date:** _____

Signature: _____ Date: _____

UPLOAD THIS FORM IN DIGITAL FORMAT TO THE SARC SITE