



RIVER OAKS HOMEOWNERS ASSOCIATION

PO Box 40956

Charleston, SC 29423

Request for Improvement, Change, or Alteration made to the Architectural Review Board

Homeowner's Name: _____

Homeowner's Address: _____

Homeowner's Phone Number: _____

Description of Request: _____

Required Documents Attached:

- Plat showing the location of all proposed and existing structures (to scale)
- Photos of the current and adjacent lots affected by proposed improvement
- Exterior elevations of all proposed structures and alterations
- Specifications of materials, color scheme, and other details affecting the exterior appearance

Other Documents Attached: _____

Request delivered by Homeowner to: _____

Request delivered by Homeowner on: _____

Request delivered to ARB by: _____

Request delivered to ARB on: _____

Date of ARB Meeting for review of this request: _____

Number of ARB Members in attendance (minimum of three): _____

Architectural Review Board Members in attendance at review of this request:

Vote of ARB for review of this request: _____ YES _____ NO

Result of Vote: APPROVED NOT-APPROVED

Comments for Non-Approval to Homeowner: _____
