

Tifton Park HOA, Inc.

Architectural Request Form

Owners' Name: _____ Phone #: _____

Property Address: _____

Mailing Address: _____

Email: _____

Description of Modification/ Please also submit a drawing of Modification:

Name of Company/Person performing the work: _____

Address and Phone # _____

Desired Start Date: _____ Anticipated Completion Date: _____

I certify that I have read the above Architectural Request Checklist and Form, the Declaration of Covenants, Conditions, and Restrictions for Tifton Park HOA, Inc., as well as the Rules and Regulations and Restrictions pursuant to said Declaration regarding changes to my lot and hereby agree that I will abide by the same, including abiding by the impervious surface restrictions for said lot.

Signature of Owner: _____ Date: _____

Please return this form by email, fax, or mail to Blue Atlantic Management:

Email: Thomas@bamgt.com Fax: 910-395-4343 5129 Oleander Dr. Ste. 101, Wilmington, NC 28403

*Any damage done to the common area by a contractor hired by the homeowner will take financial responsibility for the damage. Please also make sure contractors are insured.

BOD/Management Use Only:

Date Received: _____ Approved _____ Denied: _____

Reason:

