



ARCHITECTURAL REVIEW REQUEST

Name: _____

Address: _____

Phone: _____

Email: _____

When making changes to your property, including landscaping, out buildings, pools, etc. you must obtain Architectural Approval prior to starting your renovations. Please complete this form with a written description of your intended plan. **In addition to the written description of work, please provide drawings, elevations, specifactions and plot plans with dimensions and any additional requested documents by the Architectural Committttee with your submission.** Submit your requests before scheduling any work and allow 30 days for processing.

Return To:
Magnolia Trace Property Owners Association
magnoliatracepoa@gmail.com
Attn: Architectural Committee

Written Description:

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