

Simmons Pointe Home Owners Association

*Request for ARB Approval for Interior Modification, etc.
Approval may take up to 30 days*

Items 1 through 8 are to be completed by the homeowner.

1. Name of Homeowner _____ 2. Date of Request _____
3. Home Address _____ 4. Telephone Number _____
5. Description of Request _____

6. Attach a copy of a sketch /architectural plans and engineering report if applicable:
7. Requested Start Date _____ 8. Approximate Completion Date _____
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To Be Completed By the ARB

- Date Request Received _____
ARB Action: Approved without conditions _____
Approved with the following conditions _____

Additional information required _____
Not approved for the following reason _____

ARB Signature(s) _____

Date of ARB action _____ Date Homeowner notified _____

Please mail the completed modification form to: Property Management Services, 1340 G Ben Sawyer Blvd, Mt. Pleasant SC 29464 or you may fax the form to: 843.881.5616 or send by email to: nancy@charlestonpms.com . Thank you for your submittal!