



Polo Homeowner's Association

Architectural Control Committee Request Form

Name: _____ Phone: _____

Address: _____

Architectural Change Requested (Please include details): Please include site plans, colors, pictures, full descriptions of project with request form submittal.

FOR COMMITTEE USE ONLY:

Request Received by: _____ Date: _____

Approved _____ Denied _____

Conditions for approval/reasons for denial (if applicable): _____

Signature of Committee Chair: _____

Fax: Dan Fries 770-992-1722

Email: DFries@DanielFries.com

Office Address:

Daniel Fries & Associates, Inc.

Attention: Dan Fries, SRA

347 Dahlonega Street, Suite 200

Cumming, GA 30040

Office Hours: Monday-Friday 9-5, Suite 200)

Web Page: www.DanielFries.com