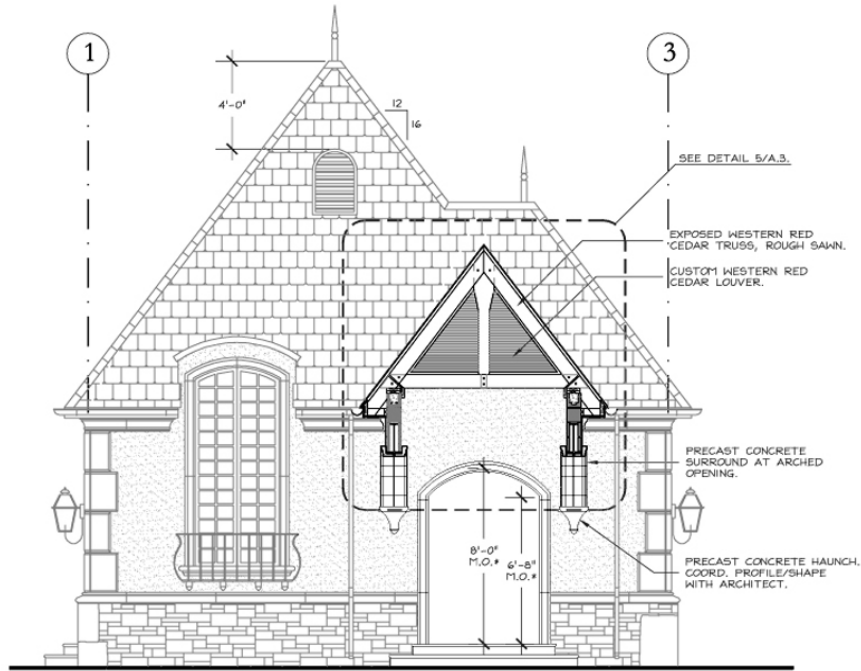


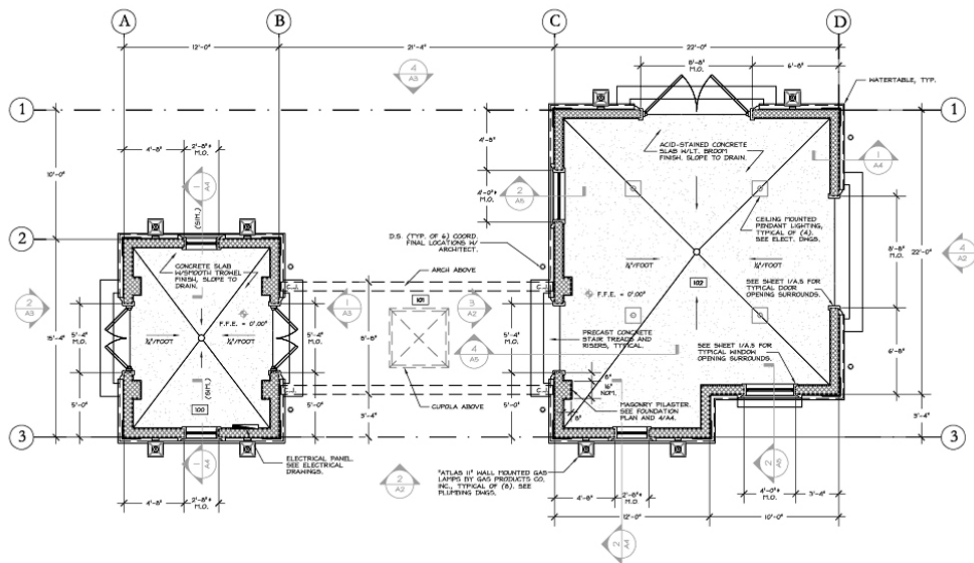
REFLECTION POINTE

SUBMITTAL FORMS

March 2018 Edition



* TYPICAL DIMENSIONS OF (3) SMALL OPENINGS.



ALL DIMENSIONS SHOWN ARE TO THE FACE OF MASONRY.
 * COORDINATE F.L.O. SIZE WITH WINDOW MANUFACTURER'S STANDARD ROUGH OPENING REQUIREMENTS.
 C.J. = CONTROL JOINT - TYPICAL (4) LOCATIONS.
 O.D.S. = DOWN SPOUT PROVIDE ELBOW AT BOTTOM AND SPILL TO STONE SPLASH BLOCKS SLOPING TO DIRECT WATER AWAY FROM BUILDING AND PARKING.
 SEE GRADING PLAN PREPARED BY OLIVANT PLANNING & DESIGN ASSOCIATES, INC. FOR ACTUAL BUILDING ELEVATION.

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON SUBMITTAL FORM ONE

TABLE OF CONTENTS

Schematic Review	Reflection Pointe Optional Schematic Review Request
Submittal One	Initial Application, Fees, Builder, and Sub-contractors
Submittal Two	Plans, Materials, and Colors
Submittal Three	Request for On-Site Reviews
Submittal Four	Featured Builder Application – Optional Featured Designer Application
Submittal Five	Lot Inspection at Site Staking
Submittal Six	Lot Inspection at Dry-In
Submittal Seven	Lot Inspection at Construction Review

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW OPTIONAL SCHEMATIC REVIEW REQUEST

THIS FORM MUST BE COMPLETED PRIOR TO SENDING DRAWINGS TO THE
REFLECTION POINTE ARCHITECTURAL CONTROL COMMITTEE.

UPON PROCESSING BY THE ASSOCIATION MANAGER,
INSTRUCTIONS WILL BE EMAILED TO THE REGISTRANT.

DELIVER, MAIL, FAX, OR SCAN AND ELECTRONICALLY MAIL THIS FORM
WITH \$200 FEE, IF APPLICABLE, PAID TO:

REFLECTION POINTE HOMEOWNERS ASSOCIATION, INC.

C/O Cedar Management Group Association Manager

Attn: Susan Rouanzion

PO Box 26844 Charlotte, NC 28221

Email: srouanzion@mycmg.com

Office: 704-644-8808

Reference: [Article 3.6](#) of the Reflection Pointe Architectural Guidelines for more information:

Lot Number: _____-S (AM: Please add “-S” to the lot number when registering, e.g., lot 1234-S)

Lot Owner / Prospective Lot Owner (PLO): _____

Lot Owner /PLO e-mail address: _____

Registrant Name (primary contact) _____

Registrant e-mail address: _____

Registrant Telephone: _____ Fax: _____ (w/area code)

ALSO, CONFIRM THE FOLLOWING AND INCLUDE FEES WHERE APPLICABLE:

I. Initials _____ Homeowner’s fees paid to HOA for current year (include if not previously paid).

II. Initials _____ \$200 for owners intending to market the home and lot upon completion of construction or potential owners other than an individual or family unit. No fee for prospective lot owners or owners who intend to become residents of Reflection Pointe. See Article 3.6

***IMPORTANT GENERAL NOTES:** All submittals after this form are to be digital. You will be provided means to access the Charette Architects web site where you will upload you plans. Reviews will commence upon receipt of the digital submittal. Reviews could take long as 30 business days per the CC&R’s, but are typically completed within a few weeks. All RPACC notifications will be issued digitally to the registrant’s e-mail address.

Owner acknowledges that for this Optional Schematic Review the efforts of the RPACC are based on good faith and that there is no guarantee or warranty that the RPACC will not find unacceptable conditions at a later date as plans become more refined and detailed that would prevent approval of the home or that could incur additional costs to construct.

Owner or Potential Owner Signature _____ Date _____

Printed Name: _____

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES
ON SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW SUBMITTAL FORM ONE (three pages)

SUBMIT THIS FORM AND YOUR APPLICATION FEES TO:

REFLECTION POINTE HOMEOWNERS ASSOCIATION, INC.
C/O Cedar Management Group Association Manager
Attn: Susan Rouanzion
PO Box 26844 Charlotte, NC 28221

(YOU WILL BE NOTIFIED BY E-MAIL HOW TO MAKE FUTURE SUBMITTALS)

COMPLETE THE FOLLOWING:

Lot Number: _____
Lot Street Address: _____
Lot Owner: _____
Registrant Name (primary contact): _____
Registrant e-mail address: _____
Registrant mailing address: _____
City: _____ State: _____ Zip: _____
Registrant telephone: (____) _____ Fax: (____) _____
Builder: _____

ALSO, CONFIRM THE FOLLOWING WHERE APPLICABLE:

- I. * Initials _____ Homeowner's fees paid to HOA for current year (include if not previously paid).
- II.* Initials _____ Main dwelling Architectural Review fee (& dock where applicable) \$1,000
- III. Initials _____ Compliance Security Deposit for dwelling construction: \$3,000 for Featured Builders or \$5,000 for New Builders (not previously established on the Featured Builders List) Must be paid from builder's account. (\$1,500 for remodel or shore stabilization); \$1000 by Owner
- IV. * Initials _____ Non-Refundable Impact Fee: \$1,000
- V.* Initials _____ Sewer Tap Fee: \$1,512
- VI.** Initials _____ Sewer Grinder Fee: \$7,006
- VII.* Initials _____ Sewer Top Protection Fee: \$200
- VIII. Initials _____ Additional Plan Review \$180 fee is attached
- IX. Initials _____ Additional On-Site Review \$180 fee is attached
- X. Initials _____ Modification to Existing Home \$325 fee is attached
- XI. Initials _____ Dock Review fee: \$250 is attached (only if sent separate from this application)
- XII. Initials _____ Review of change not addressed herein and not requiring a building permit \$75 fee
- XIII. Initials _____ Insurance Forms Attached per Article 8.5
- XIV. Initials _____ Modification fee (See article 3.15D)

* Required to be paid with the initial Submittal for any new dwelling.

** Sewer Grinder fee could vary with the cost of materials at the time of installation.

General Note: The fees listed above are HOA fees and do not include any local government fees.

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON
SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW SUBMITTAL FORM ONE

PAGE 2 of 3

This portion of the form must be completed in full prior to commencing the review. If the Association Manager does not have this on file prior to construction, you will not be issued authorization to submit your plans or to have your Builder obtain a gate access code to the community. If all subcontractors have not yet been identified, please note as TBD. When known, please resubmit this portion of the form to the Association Manager. Also, if you change subcontractors or need to add to the list, please contact the Association Manager. You will be accountable for all subs entering the community.

Address of Lot: _____

Homeowner: _____ Phone Number: _____

Contractor: _____ Phone Number: _____

Job Foreman: _____ Phone Number: _____

Architect/Engineer/ Designer: _____

Surveyor: _____

Lot Clearing/Grading: _____

Termite Co.: _____

Concrete: _____

Building Supply Company: _____

Framer: _____

Mason/Exterior Finish: _____

Water Proofing: _____

Gutters: _____

Roofing: _____

Electrician: _____

Plumber: _____

Lighting Company: _____

Wood Flooring: _____

Tile Work: _____

Carpet: _____

Cabinet Makers/Installers: _____

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW SUBMITTAL FORM ONE
PAGE 3 of 3

Painter Interior/Exterior (Approval based on Sample Board) _____

Appliances: _____

Heating & Air: _____

Garage Door: _____

Landscaping: _____

Other – Please specify type of company as well: _____

ATTESTED TO (print name): _____ Title: _____

Signature of Builder: _____ Date: _____

BUILDER, OWNER AND REGISTRANT ACKNOWLEDGES THAT THEY HAVE READ AND AGREE TO CONFORM TO THE COMMUNITY GUIDELINES AND SUBMITTAL FORMS AS OUTLINED IN EDITION DATE AS NOTED ON THE BOTTOM OF THIS PAGE:

By: (Property Owner signature) _____

Print name: _____ Date: _____

By: (Builder signature) _____

Print name: _____ Date: _____

Company: _____ NC Contractor License # _____

Contractor License Limit: _____

Areas In Box To Be Completed By Reflection Pointe Association Manger It is the Property Owner's Responsibility to Request this as Receipt of Payment			
TOTAL Review Fee(s). \$ _____	Check #: _____	Date: _____	Paid By: _____
\$ _____ / _____ Compliance Security Deposits	Check #s: _____ _____	Dates: _____ _____	Paid By: _____
RPHOA Fees Current?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Insurance forms attached per Article 8.5	<input type="checkbox"/> YES <input type="checkbox"/> NO
Submittal Received By: _____			Date: _____
Gate Code Issued: _____			Date: _____
Application Entered on the ACC Web Site _____			Date: _____

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW

SUBMITTAL FORM TWO

APPLICATION FORM - FOUR PAGES

NOTE: A copy of the contractor's insurance endorsements must be attached to this form per Article 8.2 of the Reflection Pointe Architectural Guidelines.

SUBMITTAL FORM ONE MUST BE COMPLETED PRIOR TO SUBMITTING THIS FORM.

YOU WILL RECEIVE INSTRUCTIONS BY E-MAIL AS TO HOW TO SUBMIT THIS FORM. ALL INFORMATION, INCLUDING THIS FORM MUST BE SUBMITTED DIGITALLY AS A PDF, TIFF OR JPEG.

DATE OF SUBMITTAL: _____ LOT #: _____ ORIGINAL _____ RESUBMITTAL _____ (check one)

Property Address: _____

Owner's Name: _____

Current Address: _____

City/State/Zip: _____

Primary Phone: _____ Secondary Phone: _____

E-mail: _____

GENERAL CONTRACTOR: _____

NORTH CAROLINA LICENSE NUMBER: _____ LICENSE TYPE _____

MAILING ADDRESS: _____

PHONES(S): _____ E-MAIL _____

CITY/STATE//ZIP: _____

NOTE: WHERE OWNERS ARE CONTRACTING WORK THROUGH PRIME SUBCONTRACTORS PROVIDE THE FOLLOWING. THIS INFORMATION IS NOT REQUIRED WHERE ALL WORK IS CONDUCTED THROUGH THE GENERAL CONTRACTOR. ALSO PROVIDE THE REQUIRED INSURANCE INFORMATION FOR ANY CONTRACTOR (ARTICLE 8.5).

HVAC CONTRACTOR: _____

NORTH CAROLINA LICENSE NUMBER: _____ LICENSE TYPE _____

MAILING ADDRESS: _____

PHONES(S): _____ E-MAIL _____

CITY/STATE//ZIP: _____

ELECTRICAL CONTRACTOR: _____

NORTH CAROLINA LICENSE NUMBER: _____ LICENSE TYPE _____

MAILING ADDRESS: _____

PHONES(S): _____ E-MAIL _____

CITY/STATE//ZIP: _____

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW

SUBMITTAL FORM TWO PAGE 2 of 4

PLUMBING CONTRACTOR: _____
 NORTH CAROLINA LICENSE NUMBER: _____ LICENSE TYPE _____
 MAILING ADDRESS: _____
 PHONES(S): _____ E-MAIL _____
 CITY/STATE/ZIP: _____

LANDSCAPE CONTRACTOR: _____
 NORTH CAROLINA LICENSE NUMBER: _____ LICENSE TYPE _____
 MAILING ADDRESS: _____
 PHONES(S): _____ E-MAIL _____
 CITY/STATE/ZIP: _____

ARCHITECT/DESIGNER: _____
 NORTH CAROLINA LICENSE NUMBER: _____ LICENSE TYPE _____
 MAILING ADDRESS: _____
 PHONES(S): _____ E-MAIL _____
 CITY/STATE/ZIP: _____

ARCHITECT/ DESIGNER HAS GIVEN APPROVAL FOR THE USE OF THIS PLAN ON THIS SITE AND FURTHERMORE HAS GIVEN PERMISSION FOR THE SARC TO COPY THEIR WORK FOR ITS USE: YES _____ NO _____

PLAN NAME: _____

HEATED SQ. FT. *1	1 ST FLOOR	_____	(SEE FOOTNOTE BELOW)
	2 ND FLOOR	_____	
	BASEMENT	_____	
	OTHER	_____	
	SUBTOTAL	_____	(Heated)
UNHEATED SQ. FT.:	SUBTOTAL	_____	(Under Roof)
TOTAL SQ. FT. (ADD SUBTOTALS):		_____	(Under Roof)

Identify any construction or landscaping equipment to be used that is a track type loader or excavator: _____

EXTERIOR MATERIALS: (Specify website for Manufacturer, Product Name, & Color for all that apply. If website is not available, provide a digital photograph of proposed material taken in normal daylight)

BRICK: _____ COLOR: _____ (will be approved on sample board)
 STONE: _____ COLOR: _____ (will be approved on sample board)
 STUCCO: _____ COLOR: _____ (will be approved on sample board)
 SIDING: _____ COLOR: _____ (will be approved on sample board)
 OTHER: _____ COLOR: _____ (will be approved on sample board)

¹ The HEATED SQUARE FOOTAGE shall be measured to the inside face of the interior finish materials of the perimeter walls.

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON SUBMITTAL FORM ONE

**REFLECTION POINTE ARCHITECTURAL REVIEW
SUBMITTAL FORM TWO PAGE 4 of 4**

Initials: _____

EXISTING TREE SURVEY:

- a) A plan which shows the location and identification of all hardwood trees to be saved and removed with a caliper of ≥ 6 " at the base 15 feet outside the boundary of the home.
- b) Tree protection measures.

Initials: _____

EROSION CONTROL AND SITE MANAGEMENT:

- a) A Drainage and Erosion Control Plan and including stone driveway.
- b) Show portable toilet, dumpster, and spoil locations.

Initials: _____

PRODUCT LITERATURE:

Materials brochures photocopied and sent digitally, for each material and color.

Initials: _____

PHOTOS:

- a) Digital photos of the site, labeled as to view location and orientation.
- b) Detailed photos of the full length of the street and curb especially showing any pre-construction damage.

Initials: _____

LANDSCAPE PLAN:

A copy of the Landscape Plan submitted with a legend identifying all landscape elements, pools, patios and fences. Submittal of the landscape plan may be delayed to the time of the dry-in inspection (Article 3.11). Submittal of this plan after the dry-in inspection may result in an additional review fee.

Initials: _____

CONTRACT: As specified in Article 8.1(c)

Initials: _____

Builder/Contractor's Liability Insurance endorsements required under Article 8.4.

Initials: _____

VISUALLY PERMEABLE FENCES:

Fences proposed herein comply with being visually permeable where required by these guidelines.

**THE EDITION DATE OF THE GUIDELINES USED FOR THIS SUBMITTAL IS NOTED BELOW.
THE UNDERSIGNED CERTIFIES THAT IT WILL OBTAIN, PRIOR TO THE START OF
CONSTRUCTION ACTIVITIES, SITE CLEARING, BUILDING AND ZONING PERMITS ISSUED BY
THE AUTHORITY HAVING JURISDICTION.**

I acknowledge that I have completed and included everything on this checklist prior to submitting for architectural review. I understand that this information has been requested by the REFLECTION POINTE ACC prior to my obtaining bank loans or building permits, and the full cost of any delay resulting from the association not approving the plans, if reviewed and approved within 30 business days, or if not approved, with re-submittals for non-approvals within an additional 30 business days from my re-submittal, are at my sole expense.

Lot/Property Owner Signature: _____ Date: _____

Builder Signature: _____ Date: _____

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON
SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW SUBMITTAL FORM THREE

(one page, use three times during course of construction)

REQUEST FOR ON-SITE REVIEWS

UPLOAD THIS FORM IN SAME MANNER AS SUBMITTAL TWO

1. PRE-CONSTRUCTION ON-SITE REVIEW:

A PRE-CONSTRUCTION REVIEW MUST BE SCHEDULED TEN BUSINESS DAYS IN ADVANCE AND APPROVAL TO PROCEED MUST BE ISSUED PRIOR TO BEGINNING ANY CONSTRUCTION (SEE ARTICLE 3.12)

MARK THE LOCATION OF THE SILT FENCING WITH STRING OR TAPE LINE AND STAKE THE OUTLINE OF THE HOME WITH STRING LINES ALONG MAJOR WALLS. STAKE-OFF THE DRIVEWAY. INSTALL OR STAKE-OFF THE STONE DRIVE. INSTALL THE SAMPLE BOARD. MARK TREES TO BE SAVED AND REMOVED.

NOTE: THE SILT FENCE, THE CONSTRUCTION FENCING, THE TREE PROTECTION, AND THE STONE CONSTRUCTION DRIVE MUST BE IN PLACE **PRIOR** TO BEGINNING ANY CONSTRUCTION ACTIVITIES. SUBMITTAL FIVE REFERS.

Signature of Person Requesting Review:

Date

2. REVIEW AT DRY-IN:

AT THE POINT THAT THE HOME HAS ROOFING AND THE WINDOWS AND DOORS ARE INSTALLED, THE OWNER OR THE BUILDER SHOULD NOTIFY THE REVIEW BOARD TO CONDUCT A REVIEW. THE REVIEW WILL BE SCHEDULED AS SOON AS PRACTICAL BY THE REVIEWERS. CONSTRUCTION SHOULD CONTINUE WITHOUT REGARD TO THE TIMING OF THE ON-SITE REVIEW.

Signature of Person Requesting Review:

Date

3. CONSTRUCTION REVIEW:

UPON COMPLETION OF THE HOME AND ALL LANDSCAPING AND FEATURES, THE OWNER OR THE BUILDER SHOULD CALL FOR A CONSTRUCTION REVIEW. THIS REVIEW WILL BE PERFORMED TYPICALLY WITHIN TWO WEEKS OF THE REQUEST. THE REVIEW WILL BE MADE WITH RESPECT TO SITE CLEAN-UP AND WILL RESULT IN APPROVAL OF ANY BOND MONIES THAT ARE TO BE REFUNDED TO THE OWNER OR THE BUILDER.

Signature of Person Requesting Review:

Date

UPLOAD THIS FORM TO THE SAME SITE AS YOUR APPLICATION EACH TIME YOU WISH
TO SCHEDULE AN ON SITE EVALUATION.

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES
ON SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW

SUBMITTAL FORM FOUR (A)

FEATURED BUILDER APPLICATION

THIS FORM IS REQUIRED IN ORDER TO APPLY TO BECOME/REMAIN A FEATURED BUILDER.
(See Article 8)

SUBMIT THIS COMPLETED FORM TO:
Reflection Pointe HOA Board of Directors
c/o Association Manager listed on Submittal One

I. Initials _____ COMPANY NAME: _____
QUALIFIER NAME: _____
LICENSE NUMBER: _____
LICENSE TYPE: _____
LICENSE LIMIT: _____

II. Initials _____ COMPANY BROCHURE IS ATTACHED
III. Initials _____ CONTACT NAME AND PHYSICAL ADDRESS OF THE MOST RECENT THREE PROJECTS IN THIS AREA
OF SIMILAR SCOPE AND VALUE TO THE HOME PROPOSED.

HOME NUMBER ONE: IF ALREADY A FEATURED BUILDER, LIST HOMES BUILT IN REFLECTION POINTE FIRST

1. Contact: _____
2. Telephone: _____
3. Physical Address: _____
4. Total Heated Space: _____
5. Year Completed: _____
6. Number of months under construction: _____
7. Total value of the home: _____

HOME NUMBER TWO:

1. Contact: _____
2. Telephone: _____
3. Physical Address: _____
4. Total Heated Space: _____
5. Year Completed: _____
6. Number of months under construction: _____
7. Total value of the home: _____

HOME NUMBER THREE:

1. Contact: _____
2. Telephone: _____
3. Physical Address: _____
4. Total Heated Space: _____
5. Year Completed: _____
6. Number of months under construction: _____
7. Total value of the home: _____

I HAVE READ AND AGREE TO ABIDE BY THE REFLECTION POINTE COVENANTS AND ARCHITECTURAL GUIDELINE
EDITION DATED _____.

SIGNATURE OF CONTRACTOR MAKING SUBMITTAL: _____ DATE: _____

Reflection Pointe Architectural Guidelines March 2018 Edition

**GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON
SUBMITTAL FORM ONE**

REFLECTION POINTE ARCHITECTURAL REVIEW SUBMITTAL FORM FOUR (B) - OPTIONAL

REFLECTION POINTE DESIGNER QUALIFICATIONS

THIS FORM IS RECOMMENDED TO OWNERS IN ORDER TO VERIFY CREDENTIALS OF THE ARCHITECTURAL AND LANDSCAPE DESIGNERS THEY ARE CONSIDERING TO PREPARE PLANS FOR THEIR HOME. DESIGNERS WHO DO NOT HAVE THE REQUISITE SKILL TO PROVIDE DRAWINGS MEETING THE THEMATIC AND TECHNICAL REQUIREMENTS STATED IN THESE GUIDELINES MAY CAUSE SIGNIFICANT DELAY IN THE APPROVAL OF YOUR HOME.

DESIGNERS WISHING TO BE LISTED AS A FEATURED DESIGNER IN REFLECTION POINT SHOULD COMPLETE THE FOLLOWING APPLICATION AND SUBMIT THIS COMPLETED FORM TO:

Reflection Pointe HOA Board of Directors
c/o Association Manager listed on Submittal One

COMPANY NAME: _____ TEL: _____
PROJECT DESIGNER: _____ TEL: _____
NC or GASTON COUNTY LICENSE NUMBER: _____ LICENSE TYPE: _____
E-MAIL ADDRESS: _____ ATTACHED RESUME YES NO (circle one)

CONTACT INFORMATION FOR TWO OF YOUR SINGLE FAMILY RESIDENTIAL HOMES. SUBMIT DESIGN AND CONSTRUCTION DOCUMENTS IN .PDF FORMAT THAT DEMONSTRATE YOUR EXPERTISE IN EUROPEAN ECLECTIC THEMED HOME DESIGN.

HOME NUMBER ONE: EUROPEAN ECLECTIC

1. Client Name: _____
2. Telephone: _____
3. Physical Address of home: _____
4. Total Heated Space: _____ Year Completed: _____
5. Attached are digital photos of completed home: YES ___ NO ___
6. Attached are PDFs of full document set: YES ___ NO ___
7. I/We provided on site construction services: YES ___ NO ___

HOME NUMBER TWO: EUROPEAN ECLECTIC

1. Client Name: _____
2. Telephone: _____
3. Physical Address of home: _____
4. Total Heated Space: _____ Year Completed: _____
5. Attached are digital photos of completed home: YES ___ NO ___
6. Attached are PDFs of full document set: YES ___ NO ___
7. I/We provided on site construction services: YES ___ NO ___

I agree that the information submitted in response to my desire to be listed as a Featured Designer in Reflection Pointe may be posted on the ARC Consultant Website as well as the Reflection Pointe Community Website and in any publication promoting the Reflection Pointe community. I also agree that submitting this material does not guarantee that I will be listed as a Featured Designer on any website or publication.

I HAVE READ AND AGREE TO ABIDE WITH THE REFLECTION POINTE COVENANTS AND ARCHITECTURAL GUIDELINE EDITION DATED _____.

SIGNATURE OF DESIGNER MAKING SUBMITTAL: _____ DATE: _____

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW SUBMITTAL FORM FIVE

LOT INSPECTION AT SITE STAKING

(Note: All parties required to be on site at inspection)

1. Lot Number: _____ Inspection Date: _____ Time: _____
2. Street Address: _____
3. Homeowner(s): _____
4. Builder: _____

Road and Curbing: Any pre-construction damage? _____

Water Meter: Condition of cover and piping: _____

Type of protection: _____

Sewer System: Condition of cover and piping: _____

Type of protection: _____

Silt Fence Location: Road Side _____

Interior property lines _____

Condition of Stone for driveway and location of dumpster/port-a-potty, site trash: _____

Sample Board: All materials on board? If No, explain: _____

Building materials stored: If planned for neighboring property is permission authorized? If No, explain: _____

Site Boundaries Marked? _____

House staked as noted on plan? _____

Special Conditions: _____

NOTES: Builder is responsible for maintaining site. Builder shall keep roadway clean of all debris. Roadways are to be swept clean by 5:00 p.m. each Friday. If not maintained, the RPHOA/RPACC will have the roadways cleaned and a bill will be sent to the builder.

Building materials delivered to the site: If building materials delivered to the site spill onto roadway it is the responsibility of delivery company and/or builder to clear materials from roadway. If not cleared from roadway after notification on the review site, RPHOA/RPACC will have the roadway clean and bill the builder.

Requirements for neighboring sites: Builder must have written approval to place the following on adjoining properties: Dumpster, building materials, construction equipment, vehicle parking and landscaping materials. Damage to neighboring property will be responsibility of builder under construction to make necessary repairs to bring impacted property back to pre-construction condition.

Signatures: (note: representative required on site at time of review)

Homeowner: _____ Date: _____

Builder: _____ Date: _____

RPACC: _____ Date: _____

Photos on file? YES NO

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON
SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW SUBMITTAL FORM SIX

LOT INSPECTION AT DRY-IN

1. Lot Number: _____ Inspection Date: _____
2. Street Address: _____
3. Homeowner: _____
4. Builder: _____

Curbing: Any damage due to new construction: _____

Water Meter: Condition of cover and piping: _____

Type of protection: _____

Sewer System: Condition of cover and piping: _____

Silt Fence Condition: Removed? If no explain: _____

Condition of Stone for driveway and location of dumpster/port-a-potty, site trash: _____

Sample Board: Materials on home same as board? If No, explain: _____

General Condition of Roadway: Needs cleaning and/or other: _____

Building materials stored off site: If on neighboring property has damage been fully repaired per the Guidelines? _____

Exterior Home Massing and Details as approved: If no, explain: _____

Landscape Elements as approved: If no, explain: _____

Signatures: (note: representative required on site at time of review)

Homeowner: _____ Date: _____

Builder: _____ Date: _____

RPACC: _____ Date: _____

Photos on file? YES NO

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES
ON SUBMITTAL FORM ONE

REFLECTION POINTE ARCHITECTURAL REVIEW SUBMITTAL FORM SEVEN

LOT INSPECTION AT CONSTRUCTION REVIEW

1. Lot Number: _____ Inspection Date: _____
2. Street Address: _____
3. Homeowner: _____
4. Builder: _____

Curbing: Any damage due to new construction: _____

Water Meter: Condition of cover and piping: _____

Type of protection: _____

Sewer System: Condition of cover and piping: _____

Silt Fence Condition: Removed? If no explain: _____

Condition of Stone for driveway and location of dumpster/port-a-potty, site trash: _____

Sample Board: Materials on home same as board? If No, explain: _____

General Condition of Roadway: Needs cleaning and/or other: _____

Building materials stored off site: If on neighboring property has damage been fully repaired per the Guidelines? _____

Exterior Home Massing and Details as approved: If no, explain: _____

Landscape Elements as approved: If no, explain: _____

Condition of neighboring properties impacted during the course of this work: _____

Signatures: (note: representative required on site at time of review)

Homeowner: _____ Date: _____

Builder: _____ Date: _____

Is Security Deposit Authorized for release? Explain YES or NO: _____

RPACC: _____ Date: _____

Photos on file? YES NO

Reflection Pointe Architectural Guidelines March 2018 Edition

GENERAL NOTE: BUILDER AND PROPERTY OWNER MUST ACKNOWLEDGE THEIR ACCEPTANCE OF THESE GUIDELINES ON
SUBMITTAL FORM ONE