



***ARCHITECTURAL
REQUEST***

**Westgate Townes
Homeowners Association**

Name: _____ Date: _____

Address: _____

Daytime Phone: _____ Evening Phone: _____

E-mail
Address: _____

Nature of Request: _____

Description of Materials: _____

**THE FOLLOWING ITEMS ARE REQUIRED WITH YOUR REQUEST:
Drawings, Maps, Plots, Pictures, and any other information concerning the
Architectural Changes you are requesting to make.**

**Please submit all requests to CAS, Inc 5915 Farrington Road, Chapel Hill,
NC 27517-9900 or send via e-mail to Rae Brown at rae@casnc.com.**

RENDERING AND SIGNATURE REQUIRED ON ALL APPLICATIONS

I understand that this application will be reviewed by the Board of Directors (or its Architectural Committee). I further understand that the Board of Directors (or its Architectural Committee) has the authority to approve, approve with conditions, or deny this request and that there is no appeal other than resubmission of a modified request. I further understand that the placement and design of my improvement must meet the architectural guidelines, regardless of my submission or errant approval of such submission. A variance from standards must be noted by the committee in the comments section below. Please note that Board/Committee is allowed up to 30 days to render a decision.

Owner's Signature

Date

Board/Committee Comments:
