



Application for Architectural Review & Approval

Instructions: This form is to be completed in accordance with the Public Offering Statement for Stearns Crossing, A Planned Community which you received when you purchased your lot. You must receive the approval of the Architectural Review Committee before you begin any construction. To facilitate the design review and approval process you must submit this form together with the following required information:

- A complete set of house plans showing all exterior elevations of the home detailing proposed color and building material selections to be returned by the Architectural Review Committee.
- A detailed site plan indicating compliance with setbacks and easements, if any.
- A landscape plan (must be submitted 30 days prior to occupancy per Covenants Section 822)

When all forms are complete, please make a copy of this document and attachments for your builder. You, or your builder, must then contact Molly Snavelly at 814.234.1968 to initiate review. Allow a minimum of 15 days for the final architectural review and approval process per Covenants Section 8.20b.

PLEASE COMPLETE THIS FORM USING ADOBE ACROBAT OR PRINT IT AND TYPE OR PRINT ALL REQUIRED INFORMATION

Homeowner Name(s) *Date of Application*

Current Home Address *City* *State* *Zip*

Home Telephone (Area Code) Number *Work Telephone (Area Code) Number*

Homeowner(s) E-Mail Address

Stearns Crossing Lot Number *Builder*

Builder's Telephone (Area Code) Number

Landscaper *Landscaper's Telephone (Area Code) Number*

Homeowner Name(s)

Lot Number

PLEASE BE AS SPECIFIC AS POSSIBLE REGARDING BUILDING MATERIALS AND PROPOSED COLOR SELECTIONS

Front Elevation Exterior Building Materials *Color(s)*

Left Elevation Exterior Building Materials *Color(s)*

Right Elevation Exterior Building Materials *Color(s)*

Rear Elevation Exterior Building Materials *Color(s)*

Brick or Stone Color(please submit sample) *Mortar Color*

Roof Shingle Type (please submit sample) *Color*

Gutter, Facia, Soffet Material (please submit sample) *Color*

Window Color (please submit sample) *Window Trim Color*

Shutter Color, if applicable (please submit sample)

Front Door Color (submit sample)

Walkway Material

Deck or Patio Material

Driveway Material

Additional information to help the Architechtural Reveiw Committe make an informed decision.

Homeowner Name(s)

Lot Number

HOMEOWNER CERTIFICATION

I/We certify that I/we will build my/our home according to the plan(s) submitted. We will utilize the materials and color selections as outlined above and approved by the Architectural Review Committee.

TOTAL SQUARE FEET OF FINISHED SPACE (Does not include basement or garage)

Homeowner(s)

Date

ARCHITECTURAL REVIEW COMMITTEE APPROVAL

Molly Snavely

Date

Tom Songer

Date

Alison Kurtz

Date

COMMENTS

ARCHITECTURAL REVIEW COMMITTEE USE ONLY

Date of Receipt of Completed Application: _____

Elevations and Plans: Front Left Right Rear
 Site Plan Landscape Plan

Material Samples: Brick or Stone Roof Shingle Gutter, Facia, Soffet
 Window Front Door

Date of First Review: _____ Comments: _____

Date of Second Review: _____ Comments: _____

Date of Third Review: _____ Comments: _____