

**Thornhill HOA  
Architectural Control Committee (ACC)  
Application for Modification**

**Note: Please fill out a separate form for each request, i.e. Fence, Paint, Landscape Modification, etc.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address \_\_\_\_\_  
City: \_\_\_\_\_ State: GA \_\_\_\_\_ Zip: 30097 \_\_\_\_\_  
Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Type of Modification Being Requested**

(Failure to submit all details will delay approval process – **\*requires landscape plan**)

- |   |  |   |                                 |
|---|--|---|---------------------------------|
| <input type="checkbox"/> Roof Changes   | <input type="checkbox"/> Play Equipment              | <input type="checkbox"/> Deck & Patios*                 | <input type="checkbox"/> Other* |
| <input type="checkbox"/> Gazebo/Arbor*  | <input type="checkbox"/> Swimming Pool*              | <input type="checkbox"/> Fence*                         |                                 |
| <input type="checkbox"/> Painting House | <input type="checkbox"/> Screened Porch*             | <input type="checkbox"/> Retaining Wall*                |                                 |
| <input type="checkbox"/> Landscaping*   | <input type="checkbox"/> Pool/Spas & Water Features* | <input type="checkbox"/> Structural Changes/Additions * |                                 |

**(MOST MODIFICATIONS REQUIRE CITY PERMIT AS WELL)**

**Include architectural drawings to scale, sketches to scale, property survey, contractor proposal, photos, product brochure, color samples – can use paint color link from manufacturer website, type and/or description of materials being used and their location.**

Description of Modification: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ACC Modification Received Date: \_\_\_\_\_

Proposed Start Date: \_\_\_\_\_ Proposed Completion Date: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_ Phone \_\_\_\_\_

**Note:** For your protection, inquire with the City and/or County about permit requirements before starting any work on said property involving new construction, alterations, modifications or additions. We advise you make certain you have the adequate impervious requirements for any additions.

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Neither the Declarant, the Association, the ACC, the Board, nor the Officers, Directors, Members, Employees, nor Agents of any of them shall be liable in damages to anyone submitting plans and specifications to any of them for approval, or to any owner of property affected by the declaration by reason of mistake in judgment, negligence, or disapproval or failure to approve or disapprove any such plans or specifications; nor shall any of them assume liability or responsibility for any defect in any structure constructed from any such plans and specifications.

The undersigned owner(s) hereby acknowledges that he or she is responsible for complying with any third-party easements, setbacks, buffers and any other county requirements. Any approval of plans and specifications shall not entitle improvements to be built if otherwise prohibited by any third-party easements or other County requirements.

Approval of any such structure by the ACC is in no way a certification that the structure has been built in accordance with any Governmental rule or that the structure has or complies with sound building practice or design.

Homeowner(s) acknowledge(s) that he/she has read the entirety of this form.

Permission is hereby granted for members of the Architectural Review Committee and appropriate Homeowner Association representatives to enter the property to make responsible observations and inspections of the modification request and complete project.

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**Submittal:** Please send completed form to:

Thornhill HOA  
C/O Community Management Associates, Inc. (CMA)  
1465 Northside Drive, Suite 128  
Atlanta, GA 30318  
Attention: Jennifer Mortimer

ACC forms and basic information can also be sent via e-mail to [jmortimer@cmacommunities.com](mailto:jmortimer@cmacommunities.com) or faxed to the CMA office at 404-835-9209.( Attn: Jennifer Mortimer)

<b>For Homeowner's Association Internal Use Only</b>	
Date Reviewed: _____	Information Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No
Application: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Contingency <input type="checkbox"/> Denied	
Description of Contingency/Denial: _____	
_____	
_____	
_____	
_____	