

BEXLEY WEST

ARCHITECTURAL CONTROL COMMITTEE

APPLICATION FOR HOME IMPROVEMENT APPROVAL - FENCING

Property Address: _____

Property Owner: _____

Mailing Address: _____

Telephone number: Home _____ Work _____ Cell _____

Fax _____

Improvement Project: **FENCE**

Construction Schedule: Begin date: _____ End date: _____

FENCING MATERIAL SPECIFICATIONS: *Max Fence height is 4 feet, privacy fencing is not allowed

MATERIAL TYPE (i.e. cedar, PVC, Steel/Iron, treated lumber, etc.):* _____

MANUFACTURER (if applicable): _____

STYLE (i.e. picket, X, etc.): _____

FENCE COLOR: _____

Sketch for layout: attach a plot plan showing exact fence location with dimensions & with fence height

Homeowner Signature: _____ Date: _____

DO NOT SIGN BELOW, THIS AREA IS FOR ACC USE ONLY

Date Application Received: _____ By (ACC member): _____

Application is:

☐ Approved as submitted

☐ Not Approved

☐ Approved with changes indicated

☐ Preliminary Review -

☐ Additional information is required prior to completing the review process.*

*Please provide the ACC with the following so that we may complete the review of your project:

Signature: _____ Date: _____

(For the Architectural Control Committee)

Approval is limited to design criteria established by the Architectural Control Committee and should not be interpreted as approval of any variation from restrictions or conditions imposed on the property owner by the Bexley West Covenants or Chesterfield County. Approval of this roofing application does not necessarily imply compliance with county zoning requirements.