

**FOREST BROOKE RESIDENTS ASSOCIATION, INC**  
**“A DESIGN STANDARD COMMUNITY” APPLICATION**  
**FOR MODIFICATION**

*Note: this form must be completed prior to commencing any work. Incomplete forms will be returned. Documentation submitted for review becomes the property of Forest Brooke Residents Association.*

Name:		Date:	
Property Address:		Home Phone:	
City/State/Zip		Cell Phone:	
Email Address:		Lot #:	

**MODIFICATION**

Please provide the Committee with all the information necessary to evaluate your request thoroughly and quickly. Requests must include, without limitation, the following information: site plan (including all dimensions), color chips (if applicable), detailed description of the request, list of materials, pictures, brochures (if applicable), permits required by the city/county in which you live, and any other information.

Description of Improvement or Modification Requested (attached separate sheets if necessary):	
Estimated Start Date:	Completion Date:

Please refer to the guidelines for required information to be included with this form – incomplete forms, including missing information will be returned without review.

I understand and agree that **no work on this request shall commence until written approval of the Forest Brooke ACC** has been received by me. I represent and warrant that the requested improvements and/or modifications strictly conform to the Community Design Guidelines and that these changes shall be made in strict conformance to those guidelines. **I understand that I am responsible with all city, count, and state regulations.**

Permission is hereby granted for members of the ACC and appropriate Forest Brooke Residents Association representatives to enter the property to make reasonable observation and inspection of the requested modification and completed project.

**TO SUBMIT ONLINE THROUGH VANTACA:** Please log into your Vantaca Homeowner portal and click on the “ARC Request” from the left side menu. Once on the page, you can upload this form along with all the required supporting documentation for your project request. If you do not have an account, yet, please go to [www.heritageproperty.com](http://www.heritageproperty.com), click on “Log In” and then choose the Vantaca website. Click the Signup button on the log-in screen to sign up for an account.

**Neither Forest Brooke Residents Association, the Association Board of Directors, the ACC nor their respective members, officers, successors, assigns, agents, representatives or employees shall be liable for damages or otherwise to anyone requesting approval of an architectural alteration by reason of mistake in judgement, negligence or non-feasance, arising out of any action with respect to any submission. The architectural review is directed toward review and approval of site planning, appearance and aesthetics. None of the foregoing assumes any responsibility regarding design or construction, including, without limitation, the structural integrity, mechanical or electrical design, methods of construction, or technical suitability of materials. I hereby release and covenant not to sue all of the foregoing from/for any claims or damages regarding this request or the approval or denial thereof.**

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(all homeowners must sign)

I have discussed this modification with my neighbors who will be directly impacted by the proposed modification

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please allow a maximum of 30 days for a modification review. If modification is started prior to approval, fee will be tripled.**

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FOR ACC USE ONLY:

Date Received \_\_\_\_\_

Approved  Denied  By (ACC Chair/Date) \_\_\_\_\_

Conditions:

This approval is valid until \_\_\_\_\_. If the project has not been completed by then, then the homeowner must resubmit the request.

CONDITIONAL APPROVAL: The Application for Modification will be approved within 15 days after resubmission provided that the following modifications are made.

Comments:


Final Inspection Date: \_\_\_\_\_

Approved  Rejected  By (ACC Chair/Property Manager) Date: \_\_\_\_\_

\*If rejected, please attach separate sheet explaining reason, corrective action required, and completion date. Email: [akirkland@heritageproperty.com](mailto:akirkland@heritageproperty.com) Phone: 770-200-8217

# NOTIFICATION FORM FOR THE INSTALLATION OF DBS OR MMDS SATELLITE DISH OR ANTENNA FORM

*Note: this form must be completed and returned prior to installation. Installation in a location other than one of the pre-approved locations requires ACC approval. Incomplete forms will be returned. Documentation submitted for review becomes the property of Forest Brooke Residents Association.*

Name:		Date:	
Property Address:		Home Phone:	
City/State/Zip		Cell Phone:	
Email Address:		Other #:	

1. Type of satellite dish or antenna to be installed:
  - DBS satellite dish 1 meter or smaller (e.g. Primestar, Dish network, Direct TV)
  - MMDS antenna (wireless cable) 1 meter or smaller (e.g. WANTV)
2. Installation will include a mast?  NO  YES, total height of system: \_\_\_\_\_ inches.
3. Installation of the satellite dish or antenna comply with the Association's guidelines?
4. Does the location of the satellite dish or antenna comply with the Association's guidelines?
  - Yes
  - No, I am requesting approval for an alternate location.

Please describe the exact location of the satellite dish or antenna and provide a diagram or drawing of the location. If the satellite dish or antenna is not to be installed in one of the pre-approved locations, you must provide specific, written documentation as to why the pre-approved location is not acceptable and obtain ACC approval of the proposed alternative location.

Description of Installation Location: (use other side if necessary)	
Estimated Start Date:	Completion Date:

I acknowledge that I have read, understand and have complied or will comply at all times with the Association's current guidelines with respect to the installation of satellite dishes or antennas.

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(all homeowners must sign)

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FOR ACC USE ONLY:

Date Received \_\_\_\_\_

- Meets Guidelines    
  Deviation Approved    
  Deviation Denied

By (ACC Chair) Date: \_\_\_\_\_

Email: [akirkland@heritageproperty.com](mailto:akirkland@heritageproperty.com) Phone: 770-200-8217