SOUTHERN WOODS POA, INC.

ARC APPROVAL FORM

For New Driveway / Replacement Driveway

(PLEASE PRINT ALL INFORMATION)

OWNER'S INFORMATION:		
Owner's name:		
Address:		
Phone number:		

Exist Driveway Repair /	Replacement:	
Driveway footprint (will it ren	main essentially the same	e as original Site Plan)
Yes		
No (will require a revise	d plot plan to be submitte	ed to ARC)
Type of Construction:		
Poured Concrete:		
Pavers:		
Other:	(Specify)	
Color of Pavers / Concrete Su	urface (if painted)	
Contractor Name		
Address:		
Contractor License No:		
********	********	**********
Note: Please attach the color	samples to your applicat	ion (if applicable). The color
samples must be included for	driveway repaints or pav	ers before the application can be
approved.		
For ARC Approval Only:		
Sign off Signature:		
Date:		