



**ROYAL CROWN ESTATES
HOMEOWNERS' ASSOCIATION
P.O. BOX 7028 • NOVI, MI 48376-7028**

RCEHA ARCHITECTURAL CONTROL PERMIT APPLICATION

Date of Application _____

Name of Property Owner _____ Lot Number _____

Address of Property _____ Telephone Number _____

Name, Address and Telephone Number of Contractor (If Applicable) _____

CONTENT OF APPLICATION (As Attachments To This Form):

Provide a detailed explanation of improvement proposed.

This includes: locations, dimensions, height, distance to dwelling, identify materials proposed, indicate side and rear yards, landscaping and screening if applicable, easements, rights of way, wetland and woodland designations, drainage limitations, and other relevant information.

Provide a sketch of the proposed project.

This includes: a drawing to scale on a copy of your plot plan. If you do not have a plot plan, the City of Novi Building Department can provide a copy for you. If for some reason a plot plan is not available, a detailed drawing on graph paper made to scale can be substituted.

APPLICATION PROCESS:

All applications along with attachments are to be mailed to the official association mailing address: Architectural Control Committee; Royal Crown Estates Homeowners' Association; P.O. Box 7028; Novi, MI 48376-7028.

The postmark of the application is the date of receipt by the Architectural Control Committee.

The RCEHA Declaration of Covenants, Conditions and Restrictions provide the Architectural Committee a 30 day review period (Article VII, Section 7.02). If all data required is not submitted, the review period will stop until such time the committee receives the needed information. When the additional information is received by the committee, a second 30 day review period will begin.

All Architectural Control Committee approvals are given in writing. No verbal approvals are granted or valid.

Applicant will receive a signed notice of approval upon proper review.

RCEHA Committee Use Only:

Date Application Received _____ Application Control Number _____

Application Complete _____

Date Incomplete Application Returned _____

Date of Application Approval _____

Signature of Approving Official _____