

## LAMAR POINTE ARCHITECTURAL CONTROL

OWNER INFORMATION	
NAME: _____	
ADDRESS _____	
	_____
BEST PHONE NUMBER _____	

LOT INFORMATION	
NAME: _____	
ADDRESS _____	
	_____
LOT & BLOCK _____	

BUILDER INFORMATION	
NAME: _____	
ADDRESS _____	
	_____
BEST PHONE NUMBER _____	

**BLOCKS: 1, 2, 3 AND 4** MINIMUM AIR CONDITIONED AREA WILL NOT BE LESS THAN 1,400 SQ.. FOR SINGLE FLOOR AND NOT LESS THE 1600 SQ.. FOR MULTI-LEVEL DWELLINGS

**BLOCKS: 5, 6, 7 AND 8** AIR CONDITIONED AREA WILL NOT BE LESS THAN 1600 SQ.. FOR SINGLE FLOOR AND NOT LESS THE 1800 SQ.. FOR MULTI-LEVEL DWELLINGS

	NO	YES
DOES YOUR HOUSE MEET THE MINIMUM FOOTAGE	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU ATTACHED YOUR \$150 PLAN FEE CHECK	<input type="checkbox"/>	<input type="checkbox"/>
DO YOU HAVE A GARAGE	<input type="checkbox"/>	<input type="checkbox"/>
DOES THE FRONT OF YOUR HOUSE FACE THE STREET	<input type="checkbox"/>	<input type="checkbox"/>
ARE YOUR DRIVEWAYS GOING TO BE CONCRETE	<input type="checkbox"/>	<input type="checkbox"/>
ARE YOU BUILDING BEHIND THE 20' FRONT SET BACK	<input type="checkbox"/>	<input type="checkbox"/>

ARE YOU AT LEAST 5' FROM BOTH SIDE LOT LINES	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU CHECKED FOR ANY EASEMENTS	<input type="checkbox"/>	<input type="checkbox"/>
WILL YOU HAVE A DUMPSTER DURING CONSTRUCTION	<input type="checkbox"/>	<input type="checkbox"/>
WILL YOU HAVE A PORTABLE TOILET ON SITE	<input type="checkbox"/>	<input type="checkbox"/>
IS A COPY OF YOUR SEWER APPLICATION ATTACHED	<input type="checkbox"/>	<input type="checkbox"/>
IS A COPY OF YOUR ELECTRIC APPLICATION ATTACHED	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU COMPLETED THE MASONRY WORK SHEET	<input type="checkbox"/>	<input type="checkbox"/>
DO YOU HAVE AT LEAST THE MINIMUM MASONRY REQUIREMENT	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU RECEIVED A COPY OF THE DEED RESTRICTIONS	<input type="checkbox"/>	<input type="checkbox"/>
ARE YOUR FINAL PLANS AND PLAT ATTACHED	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

MASONRY WORKSHEET

TOTAL LN.FT. OF FRONT ELEVATION	<input type="checkbox"/>	LN.FT.
HEIGHT OF FRONT ELEVATION	<input type="checkbox"/>	FT.
TOTAL SQUARE FOOTAGE OF FRONT ELEVATION	<input type="checkbox"/>	SQFT
LESS OPENINGS	<input type="checkbox"/>	SQFT
	TOTAL	<input type="checkbox"/> SQFT
MINIMUM REQUIRED 50 %		<input type="checkbox"/> SQFT
TOTAL MASONRY ON HOUSE		<input type="checkbox"/> SQFT

IF YOU HAVE ANSWERED **NO** TO ANY OF THE ABOVE QUESTIONS YOU MAY BE IN VIOLATION OF THE DEED RESTRICTIONS.

I HAVE ANSWERED THE ABOVE QUESTIONS TO THE BEST OF MY ABILITY AND CERTIFY THAT WHAT IS SUBMITTED IS WHAT WILL BE BUILT.

OWNER \_\_\_\_\_ DATE \_\_\_\_\_

APPROVAL OF PLANS AND SPECIFICATIONS SUBMITTED

ACC MEMBER \_\_\_\_\_ DATE \_\_\_\_\_

ACC MEMBER \_\_\_\_\_ DATE \_\_\_\_\_

## LAMAR POINTE MASONRY WORKSHEET

DATE:	
ADDRESS:	
LOT:	
BLOCK:	

LENGTH OF FRONT ELEVATION  
 HEIGHT OF FRONT ELEVATION  
 MULTIPLY LENGTH BY HEIGHT  
 SQFT OF ANY FRONT GABLES  
 TOTAL OF WALLS AND GABLES


TOTAL SQFT

GROSS SQFT

OPENING CALCULATION	#	WIDTH	HEIGHT	
	1	X	=	
	2	X	=	
	3	X	=	
	4	X	=	
	5	X	=	
	6	X	=	
	7	X	=	
	8	X	=	
	9	X	=	
	10	X	=	
	11	X	=	
	12	X	=	
	13	X	=	
	14	X	=	
	15	X	=	
	16	X	=	

TOTAL SQ.FT.OF OPENING

SUBTRACT OPENINGS FROM TOTAL GROSS SQFT 0 NET SQFT

MULTIPLY NET BY 50%  MIN REQUIRED

SHOW TOTAL MASONRY ON FRONT ELEVATION

IS THE TOTAL FRONT MASONRY FOOTAGE MORE THAN THE 50% NET  YES/NO