



THE TOWNSHIP AT COLONY PARK TND

Ridgeland, Mississippi

Architectural Review

Contractor/Builder Qualifications Questionnaire

CONTRACTOR/BUILDER

Name: _____

Address: _____

Phone: (O) _____

(H) _____

(C) _____

(F) _____

(Email) _____

Company Name under which you operate: _____

Number of years experience in home building: _____

Approximate number of residences constructed: _____

Five (5) Homeowner or Purchaser references:

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

Two (2) Bank References:

Bank Name	Contact	Phone
1. _____	_____	_____
2. _____	_____	_____

Upon completion, please return to:

The Township at Colony Park TND
Architectural Review Committee
c/o Kerioth Corporation
P.O. Box 16436
Jackson, Mississippi 39236

Fax 601-368-9975

CONTRACTOR/BUILDER SIGNATURE

DATE



THE TOWNSHIP AT COLONY PARK TND

Ridgeland, Mississippi

Architectural Review

Residential Architects Qualifications Questionnaire

RESIDENTIAL ARCHITECT

Name: _____

Address: _____

Phone: (O) _____

(H) _____

(C) _____

(F) _____

(Email) _____

Company Name under which you operate: _____

Number of years experience in residential architecture: _____

Approximate number of residences designed: _____

Five (5) Portfolio Examples(Please attach representative work product):

Project	Address
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

RESIDENT ARCHITECT SIGNATURE

DATE

Upon completion, please return to:

The Township at Colony Park TND
Architectural Review Committee
c/o Kerioth Corporation
P.O. Box 16436
Jackson, Mississippi 39236

Fax 601-368-9975



THE TOWNSHIP AT COLONY PARK TND

Ridgeland, Mississippi

Architectural Review
Schematic Review Request Form

LOT NUMBER : _____

LOT OWNER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

ARCHITECT

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

LANDSCAPE ARCHITECT

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

BUILDER/CONTRACTOR (IF SELECTED)

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

This request is accompanied by:

_____ Site Plan (2 sets)

_____ Floor Plan(s) (2 sets)

_____ Exterior Elevations (2 sets)

_____ **Design Review Application Fee**

_____ **Design Review Fee**

_____ **Construction Performance Deposit**

_____ **Resubmittal Fee**

LOT OWNER SIGNATURE

DATE



THE TOWNSHIP AT COLONY PARK TND

Ridgeland, Mississippi

Architectural Review

Construction Documents Review Request Form

LOT NUMBER : _____

LOT OWNER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

ARCHITECT

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

LANDSCAPE ARCHITECT

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

BUILDER/CONTRACTOR (IF SELECTED)

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

This request is accompanied by:

- ____ Site Plan (2 sets)
- ____ Floor Plan (2 sets)
- ____ Exterior Elevations (2 sets)
- ____ Details Requested (2 sets)
- ____ Landscape Plan (2 sets)
- ____ Irrigation Plan (2 sets)
- ____ Color Selections
- ____ Lighting Submittals
- ____ **Resubmittal Fee**

LOT OWNER SIGNATURE

DATE



THE TOWNSHIP AT COLONY PARK TND

Ridgeland, Mississippi

Architectural Review

Construction Commencement Request/Permit To Commence (If returned approved and signed)

LOT NUMBER : _____

LOT OWNER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

CONTRACTOR/BUILDER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

COMMENCEMENT

Anticipated date for construction to begin: _____

Municipal governing authority building permit dated: _____ **(Attached)**

Anticipated duration of construction: _____

PLEASE ATTACH A COPY OF YOUR BUILDING PERMIT AND FORWARD TO

The Township at Colony Park
Traditional Neighborhood Development
Architectural Review Committee
c/o Kerioth Corporation
P.O. Box 16436
Jackson, Mississippi 39236

OR DELIVER TO

953 Hwy 51
Suite 2D
Madison, Mississippi 39110

FOR ARC USE	
Received In Office _____	
Request Approved _____	The Township at Colony Park Architectural Review Committee Designee
Approval forwarded to Lot Owner and Contractor _____	Signed _____



THE TOWNSHIP AT COLONY PARK TND

Ridgeland, Mississippi

Architectural Review
Inspections Request

LOT NUMBER : _____

LOT OWNER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

CONTRACTOR/BUILDER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

circle one

STAKE OUT INSPECTION REQUESTED

OTHER INSPECTION

FINAL INSPECTION REQUESTED

Please attach a copy of the municipal
governing authority Certificate of Occupancy

PLEASE FORWARD TO

The Township at Colony Park
Traditional Neighborhood Development
Architectural Review Committee
c/o Kerioth Corporation
P.O. Box 16436
Jackson, Mississippi 39236

OR DELIVER TO

953 Hwy 51
Suite 2D
Madison, Mississippi 39110

OR FAX TO

601-368-9975

FOR ARC USE

Received In Office _____

Inspection Scheduled for _____



THE TOWNSHIP AT COLONY PARK TND

Ridgeland, Mississippi

Architectural Review
Inspections Report

LOT NUMBER : _____

LOT OWNER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

CONTRACTOR/BUILDER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

circle one

STAKE OUT INSPECTION

OTHER INSPECTION

FINAL INSPECTION

performed on _____

By _____

INSPECTIONS RESULTS AND COMMENTS

Proceed with construction

OK to issue TCP Permit to Occupy

Discontinue work on the site and contact the ARC immediately

FOR ARC USE
Forwarded to Lot Owner and Contractor on _____

PERMIT TO OCCUPY

THE TOWNSHIP AT COLONY PARK ARCHITECTURAL REVIEW COMMITTEE

NAME OF RECIPIENT

Mr. & Mrs. John Fortunate

This certificate issued pursuant to the requirements of the Architectural Review Committee certifying that at the time of issuance this structure was in compliance with the various Architectural Guidelines of The Township at Colony Park (TND) Association. For the following:

USE CLASSIFICATION SINGLE FAMILY RESIDENCE

OWNER MR. & MRS JOHN FORTUNATE

ADDRESS 145 HARPER STREET LOT 21

The Township At Colony Park Architectural Review Committee

Designee _____

Date _____

