



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

<b>FOR ARC USE</b>	
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 \_\_\_\_\_

