

# ARCHITECTURAL REVIEW APPLICATION

COMMERCIAL REVIEW BOARD  
P.O. Box 3009, Bald Head Island, North Carolina 28461  
(910) 457-9700 ext. 1004 [sboyett@villagebhi.org](mailto:sboyett@villagebhi.org)

Date: \_\_\_\_\_

Please check one:

- Draft Review Application
- Preliminary Review Application
- Final Review Application

Lot # \_\_\_\_\_ BHI Street Name \_\_\_\_\_

**Property Owner** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Architect/Designer** \_\_\_\_\_

Architect Address \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Builder** \_\_\_\_\_

Builder Address \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Surveyor** \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Landscape Architect \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Applicant Signature (if different than owner)

## PAINT/COLOR APPLICATION

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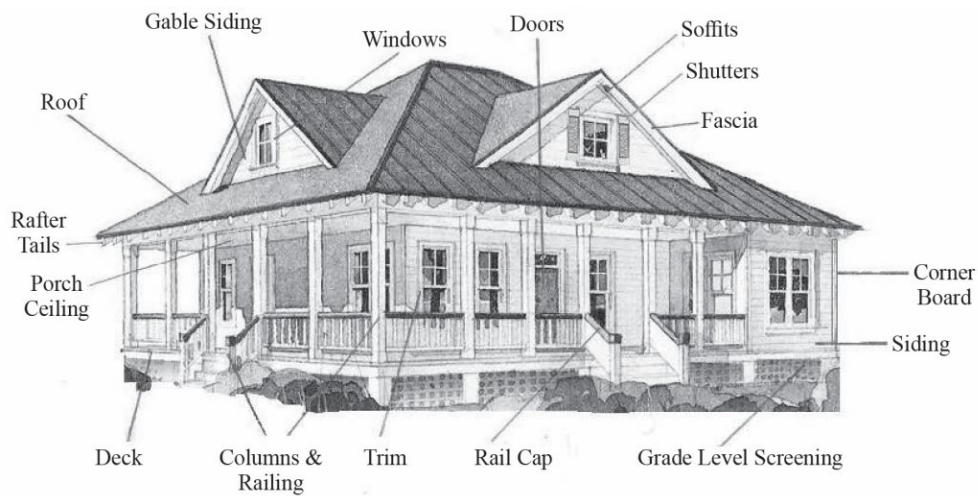
Date \_\_\_\_\_

Lot # \_\_\_\_\_ BHI Street Name \_\_\_\_\_

Property Owner \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_



### Roof (manufactured roofing sample required):

Color/Number \_\_\_\_\_

Manufacturer \_\_\_\_\_

Material \_\_\_\_\_

### MUST ATTACH MANUFACTURER-PROVIDED PAINT CHIPS BELOW

#### Rafters/Soffits:

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

**Main Body of the Bldg:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

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**Trim:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

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**Exterior Doors:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

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**Grade Level Screening:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

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**Porch Ceiling:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

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**Window Shutters:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

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**Deck:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

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**Columns and Railing:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

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**Other Accents:**

Color/Number \_\_\_\_\_

Paint/Mfg. \_\_\_\_\_

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Applicant Signature (if different than owner)

# CHANGE REVIEW APPLICATION

COMMERCIAL REVIEW BOARD  
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Date \_\_\_\_\_

Lot # \_\_\_\_\_ BHI Street Name \_\_\_\_\_

**Property Owner** \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Architect/Designer** \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Contractor/Representative** \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Change Description** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Reason for Change** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**PLEASE ATTACH SKETCH OF PROPOSED CHANGES, ELEVATIONS, FLOOR PLANS.  
MUST BE TO SCALE.**

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Applicant Signature (if different than owner)

## REVIEW QUESTIONNAIRE

COMMERCIAL REVIEW BOARD  
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Date: \_\_\_\_\_

**To be completed by all designers submitting documents for approval at Draft, Preliminary, and Final stages.**

1. Has the building been designed according to the State of North Carolina Building Code, especially regarding Americans with Disabilities Act (ADA)?  Yes  No
2. Is the designer familiar with CAMA, FEMA, and Village of Bald Head Island Zoning requirements for this site?  Yes  No
3. What is the FEMA Flood Zone for the property? \_\_\_\_\_
4. Has the designer attempted to minimize the removal or damage of existing vegetation, especially plants of special concern?  Yes  No
5. Has the structure been staked out on the lot (required for preliminary)?  Yes  No

Date staked: \_\_\_\_\_ (Trees to be removed must be tied with red surveyor's tape).

6. Area of lot (sq. ft.) \_\_\_\_\_
7. Lowest natural point beneath building (MSL) \_\_\_\_\_
8. Height of structure (highest roof ridge) above this point \_\_\_\_\_
9. First floor elevation (FFE) \_\_\_\_\_ (maximum of 2' above FEMA or 4' above average grade around perimeter exterior walls, whichever is greater).
10. Area under perimeter of all construction (building footprint) including all decks, stairs, and garages, excluding roof overhang. \_\_\_\_\_
11. Mean finished grade within this footprint. \_\_\_\_\_
12. Percentage of site to be graded (This area should be kept to a minimum and generally include on the building pad, drive and walk areas). \_\_\_\_\_ %
13. Number of trees 3 or more inches in caliper at 4' above grade proposed to be removed. \_\_\_\_\_
14. Heated first floor area. \_\_\_\_\_

15. Heated second floor area. \_\_\_\_\_

16. Heated third floor area. \_\_\_\_\_

17. Total heated area. \_\_\_\_\_

18. Total sq. ft. of porches. \_\_\_\_\_

19. Porch screen material if applicable. \_\_\_\_\_

20. Total of deck and balconies. \_\_\_\_\_

21. Are any variances from CRB requirements being requested under this application?  Yes  No

If yes, please describe and give reason \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

22. Has the architect submitted required drawing to the CRB Administrator?  Yes  No

23. Has the architect submitted an original survey prepared by a licensed land surveyor or civil engineer?  
 Yes  No

To the best of my knowledge, the foregoing statements are true.

\_\_\_\_\_  
ARCHITECT'S SIGNATURE

\_\_\_\_\_  
DATE

Architect's Seal:

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Applicant Signature (if different than owner)