Conceptual Review Form

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Address of Project					
wner		Archit	Architect		
Address			Address		
ZIP			ZIP		
Telephone		Teleph	 Telephone		
Email			Email		
Landscape Architect		Contra	Contractor		
		Address			
AddressZIP			ZIP		
Telephone			Telephone		
Email			Email		
		Eman_			
Which Category of Supplemental Gui	delines is	Being Referenced	? 🗆 Categor	ry I 🛛 Category II 🔅 Category III	
Height Restriction:		-	-	Vin. First Floor Elevation*	
Lot Coverage Max:					
Are there any Variance Requests?	🗆 Yes	, Form Attached	🗆 No	Previously Approved	
	rictions				
			louse Ancillary		
Sides Max	. Sq. Ft	Main House	A	ncillary	
Rear					
Building Square Footage Calculations			Lot Cover	age Calculations	
Conditioned				Building Footprint	
First Floor				creened/Covered	
Second Floor			C	Dpen Decking/Stairs	
Third Floor			Р	rimary Drives/Walks**	
Ancillary Structure			R	aised Planters	
Total Conditioned			Р	ool/Spa	
Additional Screened/Covered				IVAC	
Garage/Carport			_ Total Lot Coverage Sq. Ft		
Rooms			-	Area	
Bedrooms		Lot Coverage Percentage			
Bathrooms				y Elements Sq. Ft	
Exterior Materials***			Primary +	Secondary Total %	
Foundation					
Siding					
Trim					
Windows			•	e official letter for details)	
Roofing		□ /	□ Approved		
Garage		🗆	nterim Subr	nittal Required	
Paved Areas		_{□ 1}	Disapproved	l	
Other					

* Please See Cassique Designing With Nature For More Details On Height Restriction Calculations

** PRIMARY DRIVES AND WALKS INCLUDE PERVIOUS AND IMPERVIOUS MATERIALS.

*** Building Materials & Finishes Require A Completed Onsite Color Review Form & Onsite Sample Board For Final Approval