6.3 Form C: Landscape Architectural Questionnaire

orm C (1 page) Landscape Architectural Questionnaire							
Date:							
Home Site Number:							
Street / Road:							
Owner's Name:							
Address:							
Telephone:							
Landscape Architect / Designer Name:							
Firm:							
Address:							
Telephone / Fax:							
NC Registration Number:							
Has the designer visited the site? Date of last visit: Has the designer read the Master Declaration of Covenants, Restrictions, and Easements, the Protective			No:				
Covenants, and Architectural Des Has the landscape architect atter	Yes:	No:					
Does the landscape screen under the street?	Yes:	No:					
Have exterior spaces and circulat form)? Note: Trees to be remove	Yes:	No:					
Have drainage requirements bee • How (explain)?	Yes:	No:					
Are any variances from the Archit application?	Yes:	No:					
If yes, please describe at	nd give reason.						
	pecies, and planting size of landscape materials. Also include location, di wing: driveways, walks, landscape areas, fences, hardscape areas, and po		, and				
To the best of my knowledge, the	foregoing statements are true.						
Designer's Signature	Date:						

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Date:	1Nov19	20May20	31Jul20	8Jun21	23Mar23	25Jul24		
Version:	1.0	2.0	3.0	4.0	5.0	6.0		