



ARCHITECTURAL REVIEW & APPROVAL REQUEST FORM

Please complete and send this form to Development Services, Inc. to be forwarded to the Architectural Review Committee.

Date _____ Request by _____

Home Phone _____ Address _____

Alternate Phone _____ Lot _____ Block _____ Phase _____

Describe the nature of the changes or improvements for which you seek architectural review and approval. Use additional pages if necessary and attach drawings, specifications, materials and colors. Please be specific:

Proposed starting date for the project: _____ Ending Date: _____

Is a building permit required for your project? YES NO

List the general contractor and major subcontractors who will be involved:

Company/Contact: _____ Phone: _____

Other Contractors: _____ Phone: _____

SUBITTAL FOR:

- | | | | |
|--|--------------------------|--|--------------------------|
| <p>1. NEW CONSTRUCTION BUILD JOB
(Full building plans required with submission)</p> | <input type="checkbox"/> | <p>4. PAINT CHANGE
(Must include color swatches with Brand and Color names)</p> | <input type="checkbox"/> |
| <p>2. LANDSCAPE PLAN
(A full landscape plan must be submitted with a new construction job and with any modifications or additions to existing landscaping. Must include picture of planned landscape placement.)</p> | <input type="checkbox"/> | <p>5. FENCE INSTALLATION
(Must include picture /fence type/size/placement i.e. site plan.)</p> | <input type="checkbox"/> |
| <p>3. REMODEL OR ALTERATION
(Application should have concise language. Satellite dishes must include size/color of dish.)</p> | <input type="checkbox"/> | <p>6. ROOFING
(Must include manufacturer/color/material)</p> | <input type="checkbox"/> |
| | | <p>7. OTHER
(Explain in detail above. Must include picture and/or plans.)</p> | <input type="checkbox"/> |

ARCHITECTURAL COMMITTEE SECTION

Date Received by Architectural Committee: _____

Decision on Request: **APPROVED (As Submitted)** _____ **APPROVED (With attached conditions)** _____

NOT APPROVED _____

ARC Member Signatures:

_____	Date: _____
_____	Date: _____
_____	Date: _____