Ravenswood Management Association Architectural Committee Review

		RAL/ALTERATION	
Date:	_	nest Reply Phone #:	
Name:			
Address:			
Subdivision:	Lot/Building #:		
	ing: Indicate where the change is n for Permit from City	being installed.)	
Work to be perform			
Contractor:			
Address:			
License Number:			
I have read the Covenan	HOMEOWN ts and Restrictions of my Asso e without the approval of my	NERS AFFADAVIT ociation and agree to ab Association. It is und	ide by such covenants and restrictions. erstood that the owner will obtain all
Homeowner's S	ignature		Date
	FOR ASSOC	CIATION USE ONLY	
□Approved	□Denied	□Resubmi	it
Board Member	Board Member	<u> </u>	Board Member
Comments:	***APPROVAL IS CON	TINGENT ON CITY A	PPROVING***
Dated:	, 20 _		