

## ARCHITECTURAL REVIEW REQUEST FORM

NAME:	
PROPERTY ADDRESS:	
MAILING ADDRESS: PHONE: EMAIL:	HOME CELL WORK
	laration of Covenants, Conditions and Restrictions and the Association's Rules and Regulations, installation val and the Association's guidelines. I hereby request your consent to make the following changes, alterations, as to my property:
Please select the category	of the request:
Fence Swimming Pool Lawn Ornament Patio/Pavers	Screen enclosure Exterior Color Landscaping Sod Replacement  Gutters Solar Panels Other:
Describe the change, addit	on and installation and the location:
(i.e. replacing roof, landscap	e change, new windows or doors, repainting exterior, fence installation, driveway or sidewalk changes, etc.)
PLEASE INCLUDE ALL ITEMS  Copy of the plat/lot and the pl	survey with the location of the changes clearly drawn and labeled with the location of the proposed alteration
	sketches/pictures of plans or items r color picture or vendor brochure showing what the item will look like when completed where applicable
Owner Signature:	Date:
ARC C	OMMITTEE USE ONLY - DO NOT WRITE IN THIS BOX
THIS REQUEST IS H	EREBY: Denied Approved Approved with Conditions:
ARC or Board Member Date Received from Ov	Signature: Date:   Date:   Date:   Decision to Owner:    Decision to Owner: