WHISPERING HILLS ESTATES ACC PERMIT APPLICATION

Name:	Application Date:			
Phone:	Proposed S	start & End Dates:		
Owner Email:				
Block: / Lot(s)	: / Addre	ess:		
[] Owner assigns Name: _			_ as their Delegate	
Delegate Phone:	Delegate	Delegate Email:		
Please review the Reques	t process and the requir		a request on our website:	
	M REQUESTED (<mark>(</mark> RUCTURE MUST I			
☐ House Plans (new construction		☐ Garage/Car Port		
Square Footage (main struc	ture):	☐ Fence, type:	☐ Storage Shed	
Distance from street: _	(ft)			
☐ Other (specify)			_	
Please provide sketch of the lot widone. Attach any relevant detailed Property Owner commits to ham neighborhood Dumpstors or Property.	l plans/blueprints/diagr	ams/photos. demolition & waste m		
neighborhood Dumpsters or Bur Property Owner's Signature:	•	/ an ACC rules/ Date:		
Return this Completed Form & an				
			_	
ACC Decision (circle):	APPROVED	<u>DENIED</u> <u>Dat</u>		
Signatures of WHEPOA Bo	ard Members (3 re	equired): Prin	t Name	
Questions? Contact any Boar Marissa Hicks hicksmarissa Michael Hoefler michael.hoef Bryan Arias bcarias@yah Paula Fox paulacoupon Don Thompson dont1950@io	@yahoo.com ler@sunlife.com oo.com @gmail.com	Member: Peggy Schneider Linda Sciongay	1	