

BRIARWOOD PLACE HOA
ARCHITECTURAL DESIGN REVIEW FORM

Please email to community manager

Name: _____ Date: _____

Address: _____ Daytime Phone: _____

_____ Lot #: _____

Requesting Approval To: _____

Work to be performed by: _____

Type of Material (attach samples/pictures/brochures): _____

Color to be Used (attach samples/pictures/brochures): _____

**SUBMITTAL MUST INCLUDE A PLOT PLAN INDICATING LOCATION OF REQUEST AND
INCLUDE ALL APPLICABLE MEASUREMENTS AND DIMENSIONS.**

INCOMPLETE SUBMITTALS WILL BE DENIED.

I agree to comply with all applicable city and state laws, and to obtain all necessary permits. I also agree not to begin work until I have been notified in writing of the Design Review Committee's decision and to maintain all improvements to their original condition. Design Review Committee must review all submittals within 30 days. All work will be completed within 60 days from day of approval.

Owner's Signature _____ Date _____

Approved _____

Conditionally Approved _____

Denied _____

Committee Member Signature _____ Date _____