



## BLUFF OAKS STANDARD REVIEW FORM

Bluff Oaks Homeowners Association P.O. Box 943 Prairieville LA 70769

Please complete and submit this form to current Architectural Chair at BluffOaksHOA@gmail.com

### Request for Approval of:

- |  |  |                                       |
|--|--|---------------------------------------|
| <input type="checkbox"/> Addition/Renovation   | <input type="checkbox"/> Swimming Pool               | <input type="checkbox"/> Tree Removal |
| <input type="checkbox"/> Roof Shingles         | <input type="checkbox"/> Window/Door Replacement     | <input type="checkbox"/> Solar Panels |
| <input type="checkbox"/> Paint/Exterior Colors | <input type="checkbox"/> Landscape/Hardscape Changes | <input type="checkbox"/> Fences       |
| <input type="checkbox"/> Other _____           | <input type="checkbox"/> Auxiliary Structure         | <input type="checkbox"/> Generator    |

### Homeowner Contact Information:

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(Email)

### Project Information: (Please provide a description of the scope of work to be performed)

Large empty rectangular box for project description.

### HOA USE ONLY

### Action Taken:

- |  |  |                                   |
|--|--|-----------------------------------|
| <input type="checkbox"/> Approved as Submitted         | <input type="checkbox"/> Approved as Noted | <input type="checkbox"/> Rejected |
| <input type="checkbox"/> Additional information needed |  |                                   |

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Architectural Review Chair

\_\_\_\_\_  
Date