

PINE LAKE ESTATES HOMEOWNERS ASSOCIATION

ARCHITECTURAL PROJECT NOTICE OF COMPLETION

Date: _____ Owner Name: _____

Property Address: _____ Daytime Phone: _____

Owner Address (if different): _____

Type of Improvement Completed: _____

Project Address: _____

I (We) the owner(s) of the above property do hereby state that the subject project was completed in accordance with the approved Plans and that no changes or alterations were incorporated.

Signature of Owner _____ Date _____

Signature of Owner _____ Date _____

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For Committee Use

Date of Final Inspection: _____

Property is in: _____ Compliance _____ Non-Compliance

Reason(s):

Architectural Control Committee Signatures:

Committee Member Signature: _____ Date _____

Committee Member Signature: _____ Date _____

Committee Member Signature: _____ Date _____

Committee Member Signature: _____ Date _____