

TO: Lake Forest Estates
Architecture Control Committee
P.O. Box 782
Maple Valley, WA 98038

OR:

Request for Landscape / Tree Removal Approval

Homeowner's Name: _____

Date: _____

Homeowner's Phone: _____

Lot Number: _____

I plan to make the following changes to my landscaping:

Attached is my drawing/layout

I have completed the checklist below.

Request for tree removal, if applicable

Scheduled Start Date: _____

(allow 2 weeks for approval)

Scheduled Completion Date: _____

Checklist for Landscaping

- _____ Corner Lot
- _____ Percent of Sod
- _____ Percent of Sod to Right of Way
- _____ Proposed Shrubs and Trees
- _____ Impact on View
- _____ Overall Aesthetics
- _____ Rocks
- _____ Confirmation with Neighbors

I plan to remove trees from my property

Attached is my drawing/layout showing trees to be removed

Number of trees to be removed: _____

Number of trees to be planted: _____ (must be 50% of trees removed)

The existing tree policy requires that the homeowner replace 50% of the trees removed with native evergreen trees of a minimum height of 5 feet. Tree planting is subject to relevant landscaping guidelines.

Attached is my drawing/layout showing trees to be planted

Scheduled Start Date: _____ (allow 2 weeks for approval)

Scheduled Completion Date: _____

Instructions: Please fill out the requested information including the checklist and include a drawing or layout of the planned landscaping/tree removal and planting. This drawing or layout will be retained by the committee for its permanent files. Mail this form and attachments to the address above prior to starting. You will receive a response within two weeks of receipt by the Architectural Control Committee.

Approval by the committee does not indicate you are in compliance with city, county, or state building codes and permits, but are within the Lake Forest Estates CC&Rs. All building codes, permits, inspections, zoning requirements, etc. are the homeowner's responsibility. Your signature indicates you understand the above.

Homeowner Signature: _____ Date: _____

For Architectural Control Committee Use Only:

Approved Denied

Conditionally approved pending receipt of:

Drawing/Layout

Other: _____

ACC Member: _____ Date: _____

ACC Member: _____ Date: _____