ARCHITECTURAL CONTROL APPROVAL FORM

Complete with specifics and include a sketch to identify site property borders, house location on site, distance from all structures to site borders and each other, including the planned project. Include color samples for house paint even if color is not changed. Document signed by authorized chair becomes official copy. Submit to PO Box 58053/Renton 98058; or email to contact@fairwoodgreens.org.							
			Address:				
Phone:	Email:			D	ate:		
Proposed improvement/	change:						
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	Estima						
Homeowner is required	to remove all contractor si	igns wh	en contractor is r	not on site ar	nd at completion	of project.	
	Overhead View of Lo	t Show	ing Planned I	mproveme	nt	€N	
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Elevation/V	FOR BOARD USE						
			Date received:				
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			Decision Date:		Approved	Disapproved	
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Outside	Inside		1		Letter		
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