ELK RUN - ARCHITECTURAL CONTROL COMMITTEE FORM REQUESTING ARCHITECTURAL CHANGE OR ADDITION

**** WORK ON YOU	IR PROJECT MAY NOT E	BEGIN UNTIL	. APPROVAL IS GIVEN ****
Homeowner Name:			
Property Address:			
Home and Work Phone:			
E-Mail Address:			
contractor name, specifica		boundary surv	rawings, sketches, pictures, vey and a list of materials. You will cate of Insurance if a contractor is
Proposed Start Date:	Proposed (Completion Dat	e:
notified. If the project is n the ACC.	ot completed within six (6) m	onths another	of the request, unless otherwise ACC form must be submitted to
change, modification, add regulations or constructio	ition etc. has been completed	in compliance omeowner is r	equired to seek inquiry with any
	accepting responsibility for a ress or phone below attention		anding of the statements above.
Homeowner Signature		Date	
ACC Comments or Stipulation	ons:		
Approved:	Approved With Stipulations:		Denied:
ACC Signature		Date	