## DAVE'S VIEW AT MARTIN'S BLUFF ARC APPROVAL REQUEST FORM

This request from is to be completed by the homeowner and submitted to the ARC for approval PRIOR to any work commences. Please refer to your Governing Documents for information on the ARC. Committee has 30 days for approval from date of receipt.

\*All applications must have the Homeowners affidavit disclaimer/release <u>PLUS</u> vendor license and insurance attached.

If you would like notification sent to alternate address, please list below:  THIS SECTION TO BE COMPLETED BY HOMEOWNER	
Name:	
Property Address:	
Phone: Email:	
Circle All Appl	icable:
Home, Solar, Fencing, Lands	scaping, Paint, Other
<u>Location</u>	<u>:</u>
(Attach a copy of survey map or site plan with a suitable d	
<u>Specificati</u>	ons:
All applications must include detailed copies of plans, diagral color sample(s), landscape drawings, showing changes or ad specifications will not be reviewed. All requests must conform all necessary permits.	ditions, etc. Applications submitted without detailed
THIS SECTION TO BE COMPLETED BY THE A	RCHITECTUAL REVIEW COMMITTEE
REQUEST: Date Approved:Date Der	nied:
ARC Chairperson Signature:	
Comments:	

Please Return Completed Form to: Dave's View at Martin's Bluff HOA P.O. Box 2004 Kalama, Wa98625 dvatmbhoa@gmail.com