## Sherwood - Architectural Review IMPROVEMENT TO PROPERTY REQUEST

Item to be Approved:		
Property Owner's Name:		
Builder or Contractor's Name (if applicable):		
Property Location:	_phone:	email:
Property Owner's Request: (Please submit plans, drawin		
	Date	e Submitted:
Property Manager's Comments to Architectural Review C	Committee:	
Property Owner please note: <u>It is the responsibility of</u>		
being made to their property is done in compliance v	vith Covenants & R	estrictions, as it applies to your property.
(You can obtain a copy of the Covenants and Restriction	s from the POA Boar	rd of Directors or Manager. (Contact the POA
at ${\bf hoaforsherwood@gmail.com}$ if you have any questi	ons.) Approval for a	I submitals is effective for nine months
following the date it was approved.		
Review is only for compliance with the requirements of the	as Sharwood Archito	etural Paviow Committee The Preparty
Owner is responsible for all State, County, and City requi		ctural Neview Committee. The Property
□ Approved □ Approved if Corrected	d □ Revise ar	nd Resubmit    Not Approved
By:		
By:		
By:		

Revised 9/24