

Lot _____

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, drawings, sketch, photo, permits, etc. as applicable, with this request.)

_____ Date Submitted: _____

Property Manager's Comments to Architectural Review Committee: _____

Property Owner please note: **It is the responsibility of the Property Owner to make certain that the improvement(s) being made to their property is done in compliance with Covenants & Restrictions, as it applies to your property.**
(You can obtain a copy of the Covenants and Restrictions from the POA Board of Directors or Manager. (Contact the POA at mgr@LREGinc.com if you have any questions.) Approval for all submittals is effective for nine months following the date it was approved.

Review is only for compliance with the requirements of the Sherwood Architectural Review Committee. The Property Owner is responsible for all State, County, and City requirements.

☐ Approved ☐ Approved if Corrected ☐ Revise and Resubmit ☐ Not Approved

By: _____ Date: _____

By: _____ Date: _____

By: _____ Date: _____

Revised 1/16