

ARCHITECTURAL REVIEW COMMITTEE SUBMISSION FORM

Any modifications to your property must be submitted to the Architectural Review Committee for approval *PRIOR* to commencement. Please allow two to four weeks for complete processing. Include complete descriptions, dimension, style, type drawings, materials being used, etc. The more information you can provide will help to expedite your application.

Date Submitted	Phone #	Fax #	
Owner	E-r	nail:	
Property Address		City	Zip
Unit #	County		
Mailing Address if different for			
Contractor	Phone #		Fax #
	ITEMS FOR R	EVIEW	
Structural Modification Plumbing Electrical Flooring			
Other:			
Owner Comments – Attach			ing or rendering.
FOR OFFICE USE ONLY			
DATE RECEIVED	DATE APPROVED	DATE	DENIED
DATE OF LETTER	DATE OF SIGNATURE	DATE	MAILED
	Return	:0:	

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