## ARCHITECTURAL REVIEW COMMITTEE APPLICATION FOR APPROVAL (Residential)

DEVELOPMENT:	
ADDRESS:PHONE: (DAY)	
CONTRACTOR:	
ADDRESS:	
PHONE: (DAY)	
	SECOND FLOOR:TOTAL:
CONSTRUCTION MATERIALS:	
FACADE: C	Color:
TRIM:	Color:
ROOF: MATERIAL:	COLOR:
DRIVEWAY MATERIAL:	
HOUSE PLAN DATE RECEIVED:	
<ol> <li>APPROVED AS SUBMITTED:_</li> </ol>	
2. APPROVED AS NOTED:	OWNER ACKNOWLEDGE:
<ol><li>CONDITIONS FOR APPROVAL</li></ol>	L:
4. RESUBMIT:	
4. NESOBIVITT	
REASON:	
• All foundations shall be brick or stone un	nless otherwise approved (minimum 18" height)
All landagaring shall be recorded to Co	no occupant unless alle annies services
• All landscaping shall be completed befor	re occupancy unless otherwise approved.
I. have rea	nd the restrictions and my signature below confirms that any
building/addition is in full compliance with	າ all covenants.
DATE:SIGNATURE:	