

Attn: George Arabea Email: gaarabea@gmail.com

## **ARCHITECTURAL REQUEST FORM**

Owner Name:				Lot No:	
Address:					
Phone #:	Email	:			
Date Submitted: Est. Date of Project Completion:			tion:		
CATEGORY OF IMPROVEM	IENT/ALTERATION Check	one or more categories:			
Landscaping				Structure	
Sun/Screened Room	Roof/Shingles (	leaking roof, damaged tree	etc.)	Fence	
Tree Removal (replaceme	ent tree planting recommended)	Other	r		
Description:					
Information ARC requires	to proceed with your r	equest:			
PLEASE NOTE: Failure to provide all requ					
Site Plan Available at h				n & print the aerial view of lot.	
Indicate location of im		site plan – (Must be inclu	uded for review)		
Grading/landscaping p	lan (if applicable)				
Include photo, brochu	re or sketch of improvem	ent (must show full dimen	sions)		
Material listing (includin	ng colors etc.)				
Contractor/Installer sc	ope of work and any desi	ign/installation notes (I	blackout out \$ quote	es)	
FENCE INSTALLATION: Che	ck all that apply PLEASE NOT	E: Chain Link Fences are NOT p	permitted.		
Materials: Wood	Metal Fen	ce Height: 4'	5′6′		
Fence Style:Privacy	/ Picket Shad	dow Box			
Fence Design: Scallor	ped Upward Scallo	ped Downward	Straight Top		
				-	
FOR OFFICAL USE ONLY:	APPROVED:	DENIED:	ARC Mer	mber	
	Submitted to ARC:				
Reason for denial/approval c	ondition:				
ARC response to inquiry is req	uired within 45 days. Applic	cations may be mailed, or	r emailed. All complete	e requests are sent to ARC	
on day of receipt – Notice of					
deposit until yo	ur application has been app	roved. Photo must be sul	bmitted after project of	completion	