IMPROVEMENT APPLICATION

of your community and, in no way, inconveniences other	ect of requiring these applications is to ensure your improvemen eauty of your community, maintains the architectural harmony
Date:	
Name:	Lot #
Address:	
Phone Number:	
Nature of Requested Improvement:	
Location of Improvement:	
Color:	Dimensions:
Construction Material:	
Contractor:	
Supplies:	
Approximate Cost:	
 Plot Plan of the lot (showing the location of the Scale drawing of ALL improvements showing to 	home and proposed placement of improvement) the EXACT location and dimension of improvement
 Plot Plan of the lot (showing the location of the Scale drawing of ALL improvements showing to the Photograph or detailed sketch of improvement I understand the rules concerning the proposed improvement respond to this application. This improvement in no way ground nor does it disrupt any drainage ways. I agree to a solely liable for any upkeep required by the construction of building permits and meet all legal requirements for building the right of way is at the owner's risk. 	the EXACT location and dimension of improvement ent and that the Design Review Committee has 30 days to encroaches on a neighbors' limited common area or common bide by the rules established by the Association and will be of this improvement. I further agree to obtain all licenses and/or ing codes. I am aware that any improvement in an easement or
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