Highland View Homeowners' Association Architectural Improvement - Application and Review Form

	e verbal notification from the (to an Architectural Committee Member for their review. You will Committee Member and/or written approval from the Property
Homeowner Name		Date
Address Phone		Phone
Nature of Improvement		
Color (if Applicable)		
Location on Property		
Dimensions		
Construction Materials		
Supplier		
Contractor		Building Permit #
of the improvement are approval is received from If approved, I agree to b	to be attached to this app m an Architectural Comm	d, shape, dimensions, materials and location on the property plication. The improvement is not to be started until nittee Member or the Property Management Company. In application and the attached plan(s) and specifications. I not s at my expense.
Homeowner signature _		Date

*****		tural Committee Use Only XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Date Received:		Inspected/Reviewed on:
Inspected/Reviewed By:		
Approved	Disapproved	Date:
Copy sent to Property Ma	anagement Company:	Date:
Comments:		