

ARCHITECTURAL and LANDSCAPING CHANGE REQUEST FORM

Mail completed form to:

Property Services Group
P.O. Box 986
Plainfield, IN 46168

LOT #: _____ **PROPERTY ADDRESS:** _____

Check one: **Addition** **Alteration** **Replacement** **Other**

DESCRIPTION (provide as many details as possible):

Dimensions (e.g., decks, patios, pergolas): _____

For storm doors, patio doors, exterior doors, exterior trim, privacy fences, lighting, concrete, pavers, brick, stones, exterior paint, etc.:

Existing Color: _____ New Color (provide sample): _____

Building Materials and Supplier(s): _____

Contractor Name: _____ **Approx. Cost:** _____ **Est. Completion Date:** _____

Owner Name: _____ **Telephone:** _____

I understand that all exterior property modifications must comply with the Homeowners Association Covenants, By-laws, and/or Architectural and Landscaping Guidelines and also with all building codes. I understand that the Architectural and Landscaping Committee and/or Board of Directors retain final consideration and approval of this application.

Date

Signature

Architectural and Landscaping Review Committee - Individual Recommendation

Key:

A = Approved

D = Disapproved

Committee Member Name:

A D _____
(circle one) Signature _____ Date _____

Committee Member Name:

A D _____
(circle one) Signature _____ Date _____

Committee Member Name:

A D _____
(circle one) Signature _____ Date _____

Committee Member Name:

A D _____
(circle one) Signature _____ Date _____

Board Committee Chair Member Name:

A D _____
(circle one) Signature _____ Date _____

Overall Committee Recommendation:

A D _____
(circle one)

Date of Recommendation: _____

Date Recommendation Given to the President of the Board of Directors: _____

Board Approval: Yes _____ No _____

Board President Signature: _____

Date of **mid-project inspection**: _____

Mid-project inspection completed by: _____
(Print name)

Date of **completed work inspection**: _____

Completed project inspection completed by: _____
(Print name)