

REQUEST FOR ARCHITECTURAL BOARD REVIEW

Today's Date: _____

Name: _____

Address: _____

Phone Number: _____

Type and Description of Project: (Fence, Sunroom, etc.) _____

Location: (Include site plan with location of project drawn) _____

Type and Color of Materials: _____

Start Date: _____ Completion Date: _____

Name and Address of Contractor: _____

PLEASE ATTACH ANY APPLICABLE PICTURES AND OTHER DOCUMENTS INCLUDING
SITE PLAN AND SUBMIT TO Architectural Review Board Member

(See website for current Architectural Review Board Member)

Below to be completed by the CCHOA Board

☐ Approved

☐ Declined

Comments:

Board Members Signature

Name

Date