

ARCHITECTURAL REVIEW APPLICATION

DATE:	
HOMEOWNER NAME:	
STREET ADDRESS:	
PHONE (HOME):(CE	:LL):
EMAIL:	
SUBMITTAL PACKAGE FOR PROPOSED MONTE	TCATTONIC INCLUDE(C)
SUBMITTAL PACKAGE FOR PROPOSED MODIF	* *
Site Plan	Landscape Plan
Grading Plan	Accessory Structures Floor Plans
Fence & Wall Plans	
Trellises/Arbors	Patio Covers
Roof Plans	Structural Changes/Additions
Changes to Existing Colors/Materials	Other
ESTIMATED COST OF IMPROVEMENTS/MOD	IFICATIONS:
Review Committee Chairperson for reproduction	copy of the map is available from the Architectural by the applicant.) d, accompanied by sketches or overlays that depict s of the "as built" modifications are to be
APPROVED:	
	Data
Architectural Review Committee	Date:
	Date:
VGB Board of Directors	