Springbrook Hills & Springbrook Hills East Architectural Approval Form

Date:	Lot Nu	mber:	
Name:			
Address:			
Phone number:	(E-mail addro	ess)	
Type and nature of	requested improvement:		
Construction materi	al to be used:		
		Color:	
Contractor/supplier:			
Approximate cost:_	proximate cost:Other Information:		
Please note: A dra dimensions and standard the by-law encroaches on a neighbor established by the Boar acknowledge responsib application is not transfer an application to the Arc	wing of all improvements tyle along with a plat mat to solve along with a plat mat to solve and the solve along with a plat mat to solve and the solve and t	must be submitted with this application to show to show the exact location of the improvement. ing the proposed improvement and attest that it in no way sociation's common areas. I agree to abide by the rules esponsible for any upkeep required by the improvement. I nents that any public body may impose. I understand that this completed before the home is sold, the new owner must resubmit all. I further acknowledge that all work must be completed within function must be completed within 120 days from the date	
Signature		Date:	
FOR ARCHITECTUR	RAL COMMITTEE USE ONLY	' :	
Date application receive	ed:		
Approved	Disapproved	Date :	
Conditions:			