

BROOKSTON PLACE

ARCHITECTURAL REVIEW BOARD HOMEOWNER REQUEST FOR CHANGE

1. Name _____ Phone _____

Address _____

Lot # _____

2. Briefly describe the proposed change: _____

3. Will there be changes or modifications in basic utility services or existing structures to accommodate the proposed change? Please indicate.

	Yes	No		Yes	No
Electric	_____	_____	Exterior Walls	_____	_____
Telephone	_____	_____	Patio Fencing	_____	_____
Gas	_____	_____	Patio Slab	_____	_____
Water	_____	_____	Sidewalks	_____	_____
Sewage	_____	_____	Pavements	_____	_____
TV Cable	_____	_____	Other _____		

4. Please list below the major construction materials, which will be used in this project. Be as specific as possible. (Exterior materials must conform to those used on the original building or be sufficiently compatible).

5. Will the proposed project extend beyond your property line or limited common area?
Yes _____ No _____. If yes, please provide the name and address of the affected homeowner listed below.

Name _____ Address _____

6. Would any part of the proposed improvement extend into any Common Area, Utility, Drainage or Sewer Easement, Landscape Easement, Landscape Preservation Easement or Lake Easement shown on the plot plan of your lot? Yes_ No__

7. If the proposed project is an addition or alteration that would change the structural appearance of your residence, please attach the following information:

- A.) Plot plan indicating the location and dimension of the project.
- B.) Blueprints or working drawings indicating all necessary dimensions and elevations.
- C.) Color swatches/chips of the paint(s) and/or stain(s) to be used.
- D.) If available, a photograph or drawing of a similar completed project.

8. Project Schedule:

A.) The project will be done by: ___ Homeowner
 ___ Contractor(s) Name: _____
 ___ Both

B.) Please indicate the approximate time needed to complete this project, subsequent to the committee approval _____.

C.) Please indicate any building permits that will be required _____

NOTE: A PLOT PLAN INDICATING THE LOCATION AND DIMENSIONS OF THE PROPOSED IMPROVEMENT MUST BE INCLUDED WITH ANY ARCHITECTURAL CHANGE REQUEST. THIS REQUEST FORM WILL BE RETURNED TO YOU WITHOUT APPROVAL IF A PLOT PLAN IS NOT INCLUDED.

NOTE: All submitted materials shall remain the property of the Association. You may wish to make a copy for your personal records.

I hereby acknowledge that I have read and understand the DECLARATIONS OF COVENANTS AND RESTRICTIONS.

Homeowner's Signature _____

PLEASE DO NOT WRITE ON THIS PAGE

Approved by the Brookston Place Architectural Review Board

Chairman

Date

Approved by the Brookston Place Board of Directors

Date