

**WILLOW SHADE HOMEOWNERS' ASSOCIATION
ARCHITECTURAL APPROVAL FORM**

From: _____	Date Submitted: _____
Address: _____	Phone: _____

Request the following architectural change be authorized:
DESCRIPTION:

SPECIFICATIONS (specify all that apply)

Model: _____

Color: _____

Height: _____

Materials: _____

Drawing/Plan/Photo (attach additional page if more space is necessary)

Applicant hereby warrants that Applicant shall assume full responsibility for:

- A. All landscaping, grading, and/or drainage issues relating to the improvements (including replacing bonds or escrows posted by the Developer currently in place affect the Lot);
- B. Obtaining all required Town or County ordinances relating to said improvement;
- C. Complying with all applicable Town or County ordinances;
- D. Any damage to adjoining property (including common area) or injury to third persons associated with the improvement.

TO: HOMEOWNER
FROM: Architectural Control Committee

Your request for architectural change is hereby ☐ Approved / ☐ Disapproved / ☐ Approved with Condition

If approved with a condition, it is with the following condition(s):

If disapproved, for the following reasons(s):

