## WALKER BUSINESS PARK ARCHITECTURAL APPROVAL FORM

TO: Architectural Review Committee	Date
From:	Submitted:
Address:	Phone:
Request the following architectural change be authorized:  DESCRIPTION:	
SPECIFICATIONS (specify all that apply)	
Model:	
Color:	
Height:	
Materials:	
Drawing/Plan/Photo (attach if more space is necessary)	
<ul> <li>Applicant hereby warrants that Applicant shall assume full responsibility for: <ul> <li>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);</li> <li>B. Obtaining all required Town or County ordinances relating to said improvement;</li> <li>C. Complying with all applicable Town or County ordinances;</li> <li>D. Any damage to adjoining property (including common area) or injury to third persons associated with the improvement.</li> </ul> </li> </ul>	
TO: Homeowner FROM: Architectural Review Board	
Your request for architectural change is hereby Approved / Disapproved	
If disapproved, for the following reason(s):	