

SPRINGACRES HILLS HOMEOWNERS ASSOCIATION
ARCHITECTURAL IMPROVEMENT APPLICATION FORM

NAME: _____ DATE: _____

ADDRESS: _____

LOT #: _____ TELEPHONE: _____

NATURE OF IMPROVEMENT: _____

COLOR: _____ STYLE: _____

LOCATION: _____ DIMENSIONS: _____

CONSTRUCTION MATERIALS: _____

SUPPLIER: _____ APPROX. COST: _____

PLANS AND SPECIFICATIONS OF ALL IMPROVEMENTS MUST BE SUBMITTED AND ATTACHED TO THE APPLICATION TO SHOW LOCATION AND DIMENSIONS. SAID PLANS AND SPECIFICATIONS SHALL INCLUDE A COPY OF THE PLAT SHOWING THE EXACT LOCATION OF THE IMPROVEMENT ON THE OWNER'S LOT.

We, the undersigned, do hereby acknowledge that we understand the rule concerning the proposed improvement. We agree to abide by the rule set forth by the Board of Directors and will be solely liable for upkeep maintenance on this improvement.

DATE: _____

SIGNED _____
(homeowners)

FOR OFFICE USE ONLY:

Approved By: _____	Date Application Rec'd.: _____
Inspected By: _____	Received By: _____
Inspected On: _____	Approved By: _____
Reasons For Disapproval: _____	

