



ARCHITECTURAL CONTROL REQUEST: ALL OTHER EXTERIOR CHANGES

Homeowner Request for Change

Please complete items 1-6 only.

1. Name _____ Date _____
Address _____ Phone _____
Lot Type _____ Lot Number _____

2. Describe the proposed changes in as much detail as possible, the more details provided the easier it is for the committee to approve your request: _____

3. Will there be changes or modifications in basic utility services or existing structures to accommodate the proposed change? Please indicate by checking "Yes" or "No" below.

	YES	NO		YES	NO
Electric	_____	_____	Exterior Walls	_____	_____
Telephone	_____	_____	Patio Fencing	_____	_____
Gas	_____	_____	Patio Slab	_____	_____
Water	_____	_____	Sidewalk	_____	_____
Sewage	_____	_____	Pavement	_____	_____
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.) _____

Benjamin Crossing Homeowners Association, Inc

C/O Hart Consulting LLC
P. O. Box 6921 Lafayette, IN 47903
765.404.4765 / Email: cheryl.hartconsulting@gmail.com



5. Project Schedule:

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

B. Please indicate the approximate time needed to complete the project, subsequent to the Board approval. _____

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

6. Please attach the following information:

- A. Plot plan indicating the location and dimensions of the project.
- B. Blueprints or working drawings indicating all necessary dimensions and elevations.
- C. If available, a photograph or drawing of a similar completed project

NOTE: All submitted materials shall remain the property of the Association. You may wish to make a copy for your personal records. The Board/Architectural Committee is allowed up to 30 days from date of receipt to approve your request.

I hereby acknowledge that I have read and understand the ARCHITECTURAL CONTROL STANDARDS set forth by the Board, as well as the Declaration of Covenants and Restrictions.

Homeowner's Signature _____



----- DO NOT WRITE BELOW -----

Committee Action:

- () Approved as submitted
- () Approved with conditions stated in comments
- () Deferred

() Additional information required: _____

() Other: _____

() Denied

Comments:

Signed _____ Date _____

ARCHITECTURAL CONTROL COMMITTEE Representative

Signed _____ Date _____

ARCHITECTURAL CONTROL COMMITTEE Representative

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