Willow Bend Homeowners Association Architectural Request Form

Email application to:	info@wakehoa	a.com
Date:		
Homeowner's Name:		
Lot #:Property A	address:	
Resident's Phone #s: (H)		(W)
Resident's E-Mail:		
		rmission to the Architectural Committee to pect during installation and upon completions.
Resident'	's Signature	Date
FOR COMMITTEE USE:		
Date received by Architectural C	ommittee:	
Design Approval:		
YES	NO	CONDITIONAL APPROVAL
Decision and initials of participa	ting committee mem	nbers:

Remarks/Special Conditions:						
Neighbor's Approval	Encouraged	But Not Mandat	ory:			
Neighbor's Signature: Address:					<u> </u>	
Approval:	YES		NO			
Comments:						
					_	
	nap - MAND	ATORY, sketch		int chips or website link, lan naterials, location, etc.)	dscape	
Other I	nformation	or Data Pertine	nt to Request	for Design Change		
Estimated Constructi	on Dates:	Begin		Complete		
(Drew sketch or attac	h picture.)					