

HOMEOWNERS ASSOCIATION, INC. UNITS II & III: Submit Form To:

Pickett Downs Architectural Review Request

accchair@mypickettdowns.com & board@mypickettdowns.com

DATE:		
то:	Members/Architecture Pickett Downs	ral Control Committee ("ACC")
FROM:	NAME	
	STREET	
	CITY	
	STATE	ZIP
	PHONE	
ALL PLAN	IS SHALL BE INCLUDED	WITH THIS REQUEST
SI	ΓE PLAN	
нс	OUSE PLANS	
POOL PLANS		Anticipated Start Date
	OAT HOUSE PLANS	Anticipated Completion Date
	RIVEWAY PLANS	
	HER REMODELING PLA	NS
	NCE PLANS	
	TACHED BUILDINGS	
01		BY THE DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS, AS
		S TO REVIEW ALL PLANS. HE CRITERIA OF STATE, COUNTY OR LOCAL REGULATIONS WHERE APPLICABLE
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REVIEW D	OATE:	FOR ACC PURPOSES ONLY:
		AUTHORIZED SIGNATURE: M DATE OF APPROVAL)
DENIED:		FOR THE FOLLOWING REASONS: