

# ARCHITECTURAL CHANGE REQUEST

If you have architectural changes, please fill out the below form and Email to the board at

Dave Collins: powerdrc@att.net

Leon Ricketts: rickettsleon@hotmail.com

Dean Barrett: thedream61@comcast.net

All change requests need to go to the board directly.

TGL does not handle the processing of these forms and we will not know the status of your request so it is best that you contact the board directly

ASSOCIATION NAME: Brittany Village DATE: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

HOME #: \_\_\_\_\_ WORK # \_\_\_\_\_ CELL #: \_\_\_\_\_

I request permission to make the following change(s) to my home. If applicable, an architect's drawing and/or diagram, listing the specifications to must be used (including material and dimensions) **MUST** accompany this request in order to be considered by the Architectural Review Committee. For non-architectural changes such as landscaping and/or fencing include two (2) sets of drawings, at least one drawn on the lot survey of your property and a layout with configuration in respect the exterior of the unit with specific description of materials:

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CONTRACTOR TO BE USED: \_\_\_\_\_

CONTRACTOR'S ADDRESS: \_\_\_\_\_

CONTRACTOR'S TELEPHONE NUMBER: \_\_\_\_\_

I/We understand that approval of our request must be granted before the inception of the project. I/We acknowledge that we could be forced to have the item removed if it is installed without prior written approval or it is different from the approved plans and/or specifications. If the project is not begun within ninety (90) days, a new application must be submitted. Board approval in no way eliminates the need to adhere city or county codes or zoning regulations.

OWNER SIGNATURE: \_\_\_\_\_

***DO NOT WRITE BELOW THIS LINE***

## **ARCHITECTURAL REVIEW COMMITTEE DECISION**

- THE ABOVE REQUEST HAS BEEN APPROVED AS SUBMITTED
- THE ABOVE REQUEST HAS BEEN APPROVED WITH THE FOLLOWING CONDITIONS:

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- THE ABOVE REQUEST HAS BEEN DENIED FOR THE FOLLOWING REASON:

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AUTHORIZED BY: \_\_\_\_\_ DATE: \_\_\_\_\_