



## Falcon's Lair Community Service Association

### Architectural Review Application Form

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Information: \_\_\_\_\_

#### Proposed Project Details:

Contractor Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Proposed Completion of Project: \_\_\_\_\_

#### Type of Proposed Property Improvement:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Exterior Painting         | <input type="checkbox"/> Driveway         | <input type="checkbox"/> Pool/Spa               |
| <input type="checkbox"/> Landscaping               | <input type="checkbox"/> Roof Replacement | <input type="checkbox"/> Satellite/Antenna      |
| <input type="checkbox"/> Construction (Remodeling) | <input type="checkbox"/> Deck/Patio       | <input type="checkbox"/> Detached Garage        |
| <input type="checkbox"/> Construction (Additions)  | <input type="checkbox"/> Play Equipment   | <input type="checkbox"/> Arbor/Overhang/Pergola |
| <input type="checkbox"/> Others: _____             |   |   |

Materials to be Used:

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Paint Colors to be Used:

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**Please include a brief description of the proposed project:**

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**Required Documents:** Drawings, elevations, plat showing existing structures and site of new addition. A copy of your permit if required. Anything else you feel will help us fully understand your project.

\*The site plan should include all measurements, materials, colors, roof type (if applicable) etc.

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**Applicants Signature**

*For Falcon's Lair ARB Use Only:*

**Received By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approval to start**     **In process review**     **Final Review**

**Date:** \_\_\_\_\_    **Date:** \_\_\_\_\_    **Date:** \_\_\_\_\_

**Comments:**

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