

APPLICATION FOR ARCHITECTURAL CHANGE

Property Information

Date of Request: _____

Owner: _____

Address: _____

Phone: _____ Email Address _____

PPRBD Permit Number (if applicable): _____

Project Description (include dimensions, location on lot, style and finish of structure, etc.)

APPLICATION FOR ARCHITECTURAL CHANGE (CCC REVIEW)

Board/CCC Review

Primary Reviewer: _____ Completion Date: _____

Phone: _____ Email Address: _____

Application Approval

- Approved as planned
- Approved with changes
- Disapproved

Comments (description of changes, rationale for disapproval, etc.)

Reviewer Signature

Date

Property Owner Acceptance

Date
