

**Woodcroft Architectural Review Board
Application for Alterations and Additions**

Please provide 9 copies of this application and 9 copies of attachments.
Attachments include paint color chips, blueprints and plat plans.

Name: _____ Date: _____

Telephone: Home/Cell _____ Work: _____

WoodcroftNeighborhood _____ Email Address _____

Property Address _____

Request for Approval—Please provide a description of the nature of the request:

Estimated Starting Date _____ Completion Date _____

We ask that you notify your neighbors of your proposed plans. List the names and addresses of adjoining properties, indicating that you have discussed the project with them. The ARB reserves the right to notify additional neighbors of your proposed plans.

Name	Address
_____	_____
_____	_____
_____	_____

I have read a copy of the Woodcroft Guidelines for Specific Projects and understand my obligations as outlined in the Woodcroft Covenants and Restrictions. Permission is granted to members of the ARB to enter my Property if needed.

Owner's Signature _____