

# Bridgewood Estates Request for Architectural Approval

Date Submitted: \_\_\_\_\_

Homeowner's Name: \_\_\_\_\_

Homeowner's Address: \_\_\_\_\_

Division: \_\_\_\_\_

Phone #: (Home) \_\_\_\_\_ (Alternate) \_\_\_\_\_

Email: \_\_\_\_\_

## Description of Proposed Work:

### If roofing project:

CURRENT roof material type: \_\_\_\_\_

NEW roof material/brand/style: \_\_\_\_\_

NEW roof color: \_\_\_\_\_

### If Exterior Painting Project:

CURRENT Body/Main Color: \_\_\_\_\_ NEW Color: \_\_\_\_\_

CURRENT Trim Color: \_\_\_\_\_ NEW trim Color: \_\_\_\_\_

CURRENT Front Door Color: \_\_\_\_\_ NEW Front Door color: \_\_\_\_\_

CURRENT Garage Door Color: \_\_\_\_\_ NEW Garage Door Color: \_\_\_\_\_

### Any Other Projects (please describe, attach plans/layouts, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Items Attached:  Plot Plan  Color Sample(s)  Rendering  Roof Product Sample

Estimated Start Date: \_\_\_\_\_

Estimated Completion Date: \_\_\_\_\_ (Within XX days of approval)

### \*Acknowledgement of property owners who are adjacent or have a view of the proposed work.

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

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\* Note to Other Property Owners: Your signature does not constitute your approval. It indicates only that you are aware of the applicant's intention. If you have concerns with the proposed work, please notify the ACC in writing (via the Association Office) within three days of the date of your signature.

**ACKNOWLEDGEMENT OF APPLICANT:** I have read and acknowledge the Bridgewood Estates Architectural Guidelines and agree to perform any and all alterations in compliance with these guidelines. Also, I understand that an ACC approval does not relieve me from the responsibility for obtaining the necessary building permits from the governmental agencies involved, or from the responsibility for accomplishing the approved modifications in a lawful manner.

**Owners Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The approval or denial is specifically based upon and limited to the description(s); specification(s); plot plan(s); rendering(s); modification(s); color(s); improvement(s); etc., which are stated in, or attached to, this Original Request Form and is to be permanently retained as the Official Record by the Bridgewood Estates Board of Directors, Architectural Control Committee (ACC).

Either email or fax this form to: [tracy@hoacommunitysolutions.com](mailto:tracy@hoacommunitysolutions.com) or (253) 313-1219

Please allow 30 days for the approval process.

----- Section Below For ACC Use Only -----

APPROVAL Signatures

Denial Signatures

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