

Bridgewood Estates Request for Architectural Approval Other Projects (Not Roofing/Painting)

Date Submitted: _____

Homeowner's Name: _____

Homeowner's Address: _____ Division: _____

Phone #: (Home) _____ (Alternate) _____

Email: _____

Description of Proposed Work:

Any projects other than Roofing/Painting (please describe, attach plans/layouts, etc.):

Items Attached: Rendering Plot/Landscaping Plan

Estimated Start Date: _____

Estimated Completion Date: _____ (Within ___ days of approval)

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

Name: _____ Address: _____ Initials: _____

Name: _____ Address: _____ Initials: _____

Name: _____ Address: _____ Initials: _____

Name: _____ Address: _____ Initials: _____

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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: info@hoacommunitysolutions.com or (253) 313-1219. **Please allow 30 days for the approval process.**

----- Section Below for ACC Use Only -----

APPROVAL Signatures – ACC Members

Name: _____	Initials: _____	Date: _____
Name: _____	Initials: _____	Date: _____
Name: _____	Initials: _____	Date: _____
Name: _____	Initials: _____	Date: _____

Denial Signatures – ACC Members

Name: _____	Initials: _____	Date: _____
Name: _____	Initials: _____	Date: _____
Name: _____	Initials: _____	Date: _____
Name: _____	Initials: _____	Date: _____