

Quail Crossing Homeowners Association Application for Review of Construction Addition, Renovation or Landscaping Plans

Send to: Architectural Review Committee Member

Resident Name (please print) _____ Date _____

Property Address _____

Phone Number _____

Description of work to be performed:

Proposed materials, finish and colors:

Include plans, drawings, sketches or blue prints with details and specifications of propose work.

Homeowner signature _____

DO NOT WRITE BELOW THIS LINE _____

Date received _____ Decision Date _____

ACTION: Approve [] Reject []

Chairman, CHA Architectural Review: _____

Date sent to board _____

Notes: