| | | | RETURN APPLICATION TO: | | | | | | | | |
|---|-------|----------------------|------------------------|---|---------------------------------|---|--|---|-------|---------------------|--|
| O a k H i | | RCHITECTURE EVIEW | | ARB Dire | ector | | | | | | |
| | Ils F | FORM | | Dorthe E | Bugbee | | | 14465 NW Oak Hills Drive dorthebugbee@gmail.com | | | |
| EMAIL APPLICATIONS PREFERRED | | | Keith Gregory | | | 15590 NW Barkton Street kgregory1234@gmail.com | | | | | |
| Please email all ARB members or drop off printed applications, in duplicate, to one of the listed ARB members. | | | I | Dave Na | se | | | daven0517@aol.com | | | |
| | | | I | Robert E | rickson | | | 15715 NW Oak Hills Drive robertkerickson@gmail.com | | | |
| Submittal Date: Lot Num | | Lot Number: | Homeowner | | | | | | | | |
| | | | П | Renter | | | | | | | |
| Phone | | | Em | ail | | | | | | | |
| Address of Home | | | | | | | | | | | |
| Address of Owner (for Renters only) | | | | | | | | | | | |
| Phone Number of Owner: (For renters only) | | | | | | | | | | | |
| Initial Submission | | | | Previously Submitted-Appeal of Non Approva addressed. | | | | | | proval with changes | |
| Check all that apply to this Application: | | | | | | | | | | | |
| PaintExte | lor) | | | | | | | | | | |
| Concrete Work | | | | | Strucutral Modification to Home | | | | | | |
| Replace Siding or Windows | | | | | Deck or Fence Replacement | | | | | | |
| Other | | | | | Shed/Outbuilding | | | | | | |
| Description of Improvements (Text Box will expand - Do not expand beyond this page!) (Attach additional pages if necessary, to include plans, drawings, additional information.) | | | | | | | | | | | |
| | | | | | | | | | | | |
| ACKNOWLEDGEMENT of Property Owners who are most affected because they are adjacent and/or have a view of the proposed change. This signature does not imply approval or disapproval, but merely indicates an awareness of the applicant's intent. If any OBJECTIONS to this application arise, please discuss them with the | | | | | | | | | | | |
| applicant or notify the OHHA Architectural Review Board within 10 days of signing the Application form. | | | | | | | | | | | |
| Name: | | Date: | | | Name: | | | | Date: | | |
| Address | | Lot : | | | Address | | | | Lot : | | |
| Name: | | Date: | | | Name: | | | | Date: | | |
| Address | | Lot : | | | Address | | | | Lot : | | |
| ACTION TAKEN BY THE OAK HILLS ARCHITECTURAL REVIEW COMMITTEE: (official use only) | | | | | | | | | | | |
| Date: | ate: | | | [] Approved as Submitted: The application and accompanying documentation is approved as submitted. | | | | | | | |
| Board Member Initials: | | | | Not Approved: The application and accompanying documentation is not approved and no work may commence. Homeowner must resubmit with additional information and/or changes made. | | | | | | | |
| Approval by the Oak Hills Architectural Review Committee does not relieve any homeowner from compliance with local building codes and regulations. Approvals subject to ten (10) day appeal period. Construction by the applicant during this appeal period is at the applicant's own risk. | | | | | | | | | | | |