ARCHITECTURAL CHANGE (ACC) REQUEST FORM Complete all the fields below

HOA Name: Heritag	e Brook HOA		
Owner Name:		Date:	
Street Address:	reet Address:City:Zip:		
Daytime Phone:	aytime Phone:Evening Phone:		
Email:Fax:			
Proposed Start Date:		Proposed Finish Date:	
Project Type: (Please of	check all applicable categorie	es)	
□ Landscape□ Tree Removal□ Paint House□ Retaining Wall	☐ Room Addition		□ Deck □ Fence* □ Other
Description of work: _			
What is the height of the What is the finish of the Will the fence begin are	ne proposed fence? and end on the back corners o	owing: Material Type?(stain color, nature of your home? Yes \(\int\) No \(\int\)	ral, unfinished etc.)
\square Detailed written	description of the proposed	l modification s, plans, paint samples, or brochures	with photographs.
property lines, and arr ACC Committee to e	anging for required inspection	rmits that may be required, building ons and approvals. The homeowner l ke reasonable observation and ins ct.	nerby grants permission to the
Homeowner Signature	e:		
		ACC Committee Use	
	nnt:		
☐ Approved ☐ Appr	•	☐ Denied ☐ Denied — Insuffic	cient Information
Notification Via: ☐ US Comments:	SMAIL □ EMAIL □ FAX		

Submit Form to: manager@elevatehuntsville.com