Application For Fence Construction (Attach To Design Review Application)

DO NOT BEGIN WORK UNTIL APPLICATION APPROVED BY ARB

Name:	Block:	Lot:
Street Address:		
Phone Numbers: Day	Evening	
E-mail:		
Fence Type will be: O Board on Board O Shadow Box O Picket O Other	Fence Height will be:	
Fence Material will be: O Wood O Vinyl O Other	Fence Color will be: O Natural O White O Other	
Please Attach the Following:		
 □ A picture and/or detailed section drawing of w □ A lot drawing showing all boundaries and stree (1) Where you intend to install the fence in the trees 8 inches in diameter at 2 feet above groun so as not to damage these trees. 	ets that intersect your lot. Items to be e rear yard with actual footage indicat	included in this drawing:
Homeowner(s) Signature:		X
	o take action on your applica	tion
☐ Approved ☐ Partial Approval		NOO.X 10 10 10 10 10 10 10 10 10 10 10 10 10
Fence must be installed in the REAR Yard. Comments:		
Fence Approval (must b	be signed by at least two ARB membe	ers)
ARB Mer	mber	ARB Member
ARB Men		
Please notify the Management Company when work is completed for final inspection		
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