

Little River Mews Homeowners Association

EXTERIOR MODIFICATION APPLICATION

DATE OF APPLICATION _____

APPLICANT NAME
(must be owner) _____

PROPERTY ADDRESS NUMBER _____

OWNER'S MAILING ADDRESS
STREET / CITY / STATE / ZIP
(if different from property) _____

EMAIL ADDRESS _____

TELEPHONE CELL _____
DAY _____
EVENING _____

ARB ACTION

DATE	APPROVED	DISAPPROVED

FURTHER ACTION REQUIRED

REASON FOR DISAPPROVAL _____

APPLICATION FOR EXTERIOR MODIFICATION TO: (CHECK ALL THAT APPLY)

- ROOF _____ SIDING _____ WINDOWS _____
DOOR _____ STORM/SCREEN DOOR _____ PAINTING _____
DECK _____ FENCE _____ YARD _____
OTHER: _____

DESCRIPTION: _____

(ATTACH SITE PLAN, DETAILED DRAWING, PICTURES, AND COLOR SELECTIONS FROM APPROVED CHART)

NOTE: Signatures of neighbors are not required unless the ARB determines there is a significant impact and requests that you obtain them prior to approval of the request.