REQUEST FOR APPROVAL BY:
ARCHITECTURAL REVIEW COMMITTEE

Address of Property:________________________________________ Lot No._________

Owner’s Name:_______________________________________________________________

Phone Number (Residence) ( )________________________________________

Phone Number (Work) ( )________________________________________

Phone Number (Fax) ( )________________________________________

Describe the nature of the work to be done:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Attach all pertinent information:

- Plat of survey
- Architectural drawings
- Specifications
- Samples and/or color charts
- Other

For office use only:

Request received by:__________________________ On:______________

Request: ________Approved ________Denied Date:______________

Review decision sent to owner on:______________ By:______________

WBECA Form #004
Date issued: 7/04
Rev.0