Willow Bluffs Homeowners Association, Inc. Architectural Change Request Form

Please submit this application and any attachments to:
Sentry Management, 3700 National Dr., Ste. 203, Raleigh, NC 27612
Phone 919-790-8000 Fax 919-790-5824 Email: jrowles@sentrymgt.com

Homeowner's Name:			
Homeowner's Address: _			
Homeowner's Phone:			
Homeowner's Email:			
Covenants. I request project project only. I grant permisupon completion of the provided willow Bluffs Homeowner violates the existing Association of Willow Blumanner fully compliant willow project and my entire progreimburse the Association necessary permits required 800-632-4949 (Call-Before PLEASE READ CAREFULL DAYS FROM RECEIPT OF SCHEDULEING CONTRACE	d project to be fulled approval by the Assision to the Association oject. I also agree to as Association, Inc. astation Covenants, is ffs Homeowners Assist the covenants are operty to become full expenses assist by local government and approved by local government of the Complete Applications. Tors, ETC. PLEASE Control of the Association of the Applications of the Association of the Associat	sociation and/or Architectural Coron to enter my property and insponents of cause the proposed improvement and/or Architectural Committee and completed within the allot sociation, Inc., I will cause the appropriately maintained or ally compliant with the covenar sociated with the compliance. I state having jurisdiction. Furthermose am planting in or near a commone and planting in or near a commone and appropriately maintained or ally compliants. I state having jurisdiction. Furthermose am planting in or near a commone and planting in or near a	luffs Homeowners Association, Incommittee for the following described pect the project prior to, during, and ent to be properly maintained. If the determines this project in any way ted time, or not maintained to the project to become completed in a allow the Association to cause the stand maintenance standards and will be responsible for obtaining all ore, I will be responsible for calling 1-th area easement. TS VARIES. PLEASE ALLOW 30-60 NSIDER THIS TIMEFRAME WHEN Y AND PROVIDE AS MUCH DETAIL EN THIS PROCESS. THANK YOU,
Homeowner Signature			Date
Please have all adjacent lot	owners' sign that th	ey have seen the plans of the pro	oposed project:
Signature	Name	Address	Phone

Describe Proposed Changes or Additions:

<u>To help speed up the process the proposed plan should include:</u> sizes, styles, colors, heights & dimensions, description of materials, etc. Attach a copy of your plot plan (if possible) or sketch and indicate location of proposed exterior design change on lot in relation to house, other existing structures and property lines. Also attach any sketches, specifications, pictures, paint charts, or the like that will assist in reviewing this application.

·	-	se levels, and other privacy intrusions will be nt, i.e. trees restricting views and pool pumps.
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ESTIMATED CONSTRU	CTION DATES: *Start	Finish
		, since the Association can force its completion.
•	eview process may take 30-60 days fro	•
Other Information Rep	garding Project Request:	
	Architectural Committee/ S	Sentry use only
Special Condition for a	pproval:	
Approved	Disapproved(include rea	
	Include lea	(See above)
Signature:	Date:	
Willow B	luffs Homeowners Association, Inc. Officer	and/or

Architectural Committee Member