

DESIGN REVIEW APPLICATION
Architectural Control Committee
Nisqually Estates Homeowners Association

Application for the approval of [check one]: Preliminary Plans _____ Final Plans _____

Description of Proposed Project (please include drawing or detail on separate page if necessary, house painting requests must include color samples or paint codes for body, trim and accents): _____

Estimated Time to Complete Project After Approval: _____

Work to be performed by [check one]: Owner _____ Contractor _____

Contractor Info (if applicable): _____
Name Address Phone

By my signature below, I certify that I am the homeowner and that all above information is true and correct. I acknowledge that any modification after approval must be re-submitted to the ACC and that I am responsible for obtaining any required City, County or State permits. I also acknowledge that an approval is effective for six months and is deemed revoked if I have not commenced work within that period.

Homeowner Signature: _____

Homeowner Printed Name: _____

Address: _____

Lot Number: _____ Date: _____

Email: _____ Contact Phone: _____

Architectural Control Committee [ACC]: The above described project is

- Approved.
- Approved with the following modifications: _____

- Disapproved. Reason(s): _____

ACC Authorized Signature: _____ Date: _____

ACC Authorized Signature: _____ Date: _____