

## Golfside at Ulen Architectural Review Application Form

Owner Names \_\_\_\_\_  
Property Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Contractor Information

Contractor Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Project Start date \_\_\_\_\_ Project End date \_\_\_\_\_

### Proposed Project

☐ Fence ☐ Playscape  
☐ Pool ☐ Additions/Alterations of existing structure or property  
☐ Landscaping ☐ Exterior Paint Color Change (provide paint chip)  
☐ Roofing Color Change ☐ Other

### Description of Project

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please attach to this request: (1) a copy of the plans and /or diagram, with dimensions and type of materials to be used; and (2) a copy of the plot plan with the proposed improvement(s) to be constructed drawn on the plan where they are to be located.

I/We understand that: (a) if this request is granted, I/we may still have to apply to the appropriate governmental agency for any required building permits, and I/we must comply with all applicable building codes, etc.; (b) construction may not start until an approved copy of this request is returned to us; and (c) it may take thirty (30) days for action upon this request and for a copy to be returned to me/us.

Owner Signature(s)

\_\_\_\_\_

*All owners must sign this form to be valid*

*Please email your request to a member of the ARB. Check the Golfside website for email addresses.*

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### Architectural Review Board Response

Date Received: \_\_\_\_\_ Date Approved/Denied: \_\_\_\_\_

☐ Approves the plan as submitted

☐ Disapproves your request at this time due to the following:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signatures of Architectural Review Board:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Permits are valid for 90 days from date of issue.