

## ARCHITECTURAL REVIEW APPLICATION FORM

## ALL APPROVALS MUST BE IN WRITING. VERBAL OR ANY OTHER TYPE OF APPROVALS WILL NOT BE CONSIDERED VALID OR LEGAL.

SUBMIT REQUESTS TO: DEVELOPMENT SERVICES ~ 9601 W. STATE ST. #203 ~ BOISE, ID 83714

Date: Owner Name:	
Property Address:	LotBlockPhase
Email:	Phone:
Estimated Start Date:	_ Estimated Completion Date:
APPLICATION FOR:	PERMITTING:
☐ Landscape Addition or Change	Is a building permit required?
☐ Fence Installation or Change	□ YES
☐ Remodel or Alteration	□ NO
☐ Roofing	If yes, please provide a copy of permit.
☐ Exterior Paint	in yes, preuse previde a copy of perima
Body:	**Please attach diagrams/color
Trim:	·
Fascia:	of this form if additional room is
Accent:	needed.
Door:	
□ Other:	
Phone:Email:  Description of Request:	ail:
Owner Signature:	Date:
approval to comply with the CC&Rs and in no way does this aspect of the improvement. All local codes and laws are the fully inclusive review however unless a specific variance is CC&R & ACC requirements will be met by the owner.	om the Crystal Cove HOA is required. I also understand that this approval have any bearing as to the safety, soundness, or legate owner's responsibility. The HOA makes every attempt to programmed, it is expected that regardless of plan notations all mi
For Architectural Committee Use:	
Date Received:	Date Returned:
☐ Further Review Necessary	☐ Approved with conditions
☐ Approved as Submitted	□ Not Approved
Acknowledged By:	Date:
Acknowledged By:	Date: