

Date Received _____

East Valley Association, Inc. Architectural Review & Approval Request Form

Please complete and return this form to DSI, 9601 W State St, Ste 203, Boise ID 83714,
or email to danielle@dev-services.com, or fax 208-939-6118.

Date _____ Requested by _____

Phone _____ Address _____

Email _____ Phase _____ Block _____ Lot _____

Review and Approval is requested on the following changes or improvements:

Proposed starting date for the project _____ Ending date _____

Submittals should be sent at least two weeks (14 days) PRIOR to your starting date to allow the time needed for the review and approval process.

General contractor and major subcontractors who will be involved. Note: all permits and licenses required are the responsibility of the homeowner.

Identify the documents attached to this request

plans _____ Specifications _____ permit _____ survey _____

Other (please specify) _____

Architectural Review Committee Section

Decision on Request: Approved _____ Not Approved _____ Deferred _____

Architectural Review Committee Members' Signatures

Date Signed _____