## HUNTINGTON WEST HOMEOWNERS ASSOCIATION REQUEST FOR ARCHITECTURAL CHANGE/ADDITION

## \*\* WORK MAY NOT BEGIN UNTIL PROPER APPROVAL IS GIVEN \*\*

Date Submitted:		
Owner Name(s):		
Address:		
Phone:	Email:	
	ACT LOCATION of Improvement proposed: pictures, contractor's specifications, site plans	
If painting, please s	ubmit manufacturers, id numbers and col	or names:
Proposed Start Date:	Proposed Completion Date:	
Committee may take <b>Homeowner will be h</b>	allow the appropriate time for approval. The up to Thirty (30) business days to review placeld responsible for any damage to private or Atrucks, equipment, etc. used in relation to the	ans and specifications.  Association property caused by
Return Form To:	Huntington West Architectural Control Committee c/o Todd Starr, ACC Chairperson 1919 Gray Gables Way Buford, GA 30519	
Or submit via emai	l to acc@hwhoa.org	
AR	CHITECTURAL CONTROL COMMIT	TEE ACTION
Date Received:	Date Reviewed:	
[ ] Approved	[ ] Conditional Approval*	[ ] Denied*
*Require Explanatio	n	