Deep Branch Woods HOA, Inc.

ARCHITECTURAL CHANGE REQUEST FORM

Any modifications to your property must be submitted to the Architectural Review Committee for approval PRIOR to any work or modifications being constructed on your property. Please allow up to 30 days for complete processing. Include complete descriptions, dimensions, style, type drawing, materials being used, colors, etc. The more information you can provide will help expedite your application. Please provide a graphic showing the location of improvement(s) in relation to other structures. Graphic should be marked showing location of any proposed fences, decks, drainage plans, sheds, structural additions, and pools.

Date submitted:	Owner	r:
Phone #:	Fax #:	Email:
Lot #:		
Address:		
Corner Lot: Yes or No R	ear: Front:	·
Contractor:		Phone #:
Fax #:		
		ITEMS FOR REVIEW
Deck:		Shed:
Drainage Plans:		Structural Addition:
Fence:		Swimming Pool:
Other:		
Briefly describe the propo	sed change:	
Attach or state specific mo	nterial list, color sam	nples, photo, or rendering

Homeowner is responsible for compliance with all applicable County ordinances and permits if application is approved. An approval does not relieve applicant from obtaining the necessary building permits from the governmental agencies involved.

Return to:

Deep Branch Woods HOA, Inc.

Mail: 25391 Branch Lane, Milton DE 19968 Email: scottb19147@gmail.com

For Board Use Only				
Date Received:	Date Approved:	Date Denied:		
Date of Letter:	Date of Signature:	Date Mailed:		