

ARCHITECTURAL CONTROL COMMITTEE SUBMITTAL FORM

(Please Print or Type)

Owner(s) of Record:			
Phone (H):	Phone (W):	Lot No	
Phone (H): Street Address: Mailing Address:			
Mailing Address:	City:	State:	Zip:
Email Address			
☐ Initial Submittal; ☐ Re-subm	ittal after Disapproval; [Re-submittal wi	th Additional Information
(site plan, building plans, elevation	n plans, etc.), specificat	ions (type of mater	ome or landscaping, and attach all plans ial to be used, color chips, etc.), and any pace is required, please add additional
Name of Contractor:		Phone No.:	
Submittal Fee Attached: \$			
Submitted by:	d by: Date Submitted: (Signature)		
	For ACC	C Use Only	
Date Submittal Received:			
Case Number: Action Taken: Approved; Date of Notice to Owner:	☐ Disapproved; ☐		
Date Construction Deposit Receiv	red:	Amount Received	: \$
Date Construction Commenced: _	Date of Fir	nal as-Built Inspect	ion:
Date Construction Deposit Return	ed·	Amount Return	ed: \$