

Las Brisas Architectural Committee

Application for Home Modification

Applicant/Homeowner:	Date:
Address:	
Home Phone:	Work Phone:

Brief description of the intended modification:
Please attach a plan (approximately to scale) of the proposed addition, removal, or change that you wish to make. This should include the location, materials, size, tech. specs and any other pertinent information

Work to be performed by:	
Self: <input type="checkbox"/>	Contractor Name and License #:
Building permit required: Yes <input type="checkbox"/> No <input type="checkbox"/>	
If required, building permit obtained:	

Approval to begin work by the Las Brisas Architectural Committee at this day __ of _____		
Committee Members:		
1.	Name:	Signature:
2.	Name:	Signature
The committee reserves the right to revoke/reject designs or materials until final approval is issued.		

Las Brisas Architectural Committee final approval this day __ of _____		
1.	Name:	Signature:
2.	Name:	Signature
To be obtained within one year (12 months) from the day of approval to begin work.		