

Sans Famille Architectural Change Form

To: Sans Famille Architectural Committee

From: _____ Lot no: _____ House no: _____
(name)

Phone: _____ Email: _____

Date: _____

Reference: Proposal for alteration/addition/modification

I. Description of Project

Please provide information as defined in the attached "Architectural Change Guidelines."
Additional pages may be attached to fully describe your change.

Note: Approval of the Architectural Committee does not in any way eliminate the necessity to apply for and obtain all local government approvals as may be applicable to your change (e.g., building permits and/or inspections).

II. Signatures of Adjacent Homeowners (all homeowners with adjoining property):

	Signatures	Lot #	/	House #	Date	"Concur" or "Object"
(1)	_____	_____	/	_____	_____	_____
(2)	_____	_____	/	_____	_____	_____
(3)	_____	_____	/	_____	_____	_____
(4)	_____	_____	/	_____	_____	_____

*If "Object" please give your name and objections on reverse side.

Architectural Committee Action:

_____ Approved	_____ (date)
_____ Disapproved (with attached recommendations)	_____ (date)
_____ Copy sent to President, SFHOA	_____ (date)
_____ Copy sent to homeowner	_____ (date)