Griffin Gate Community Association

ACDR Application

Revised May 14, 2013

Must be filed by the 1st day of the month

Property Owner: _____ **Date**: ____/ ____/ _____ Phone**:** _____

Property Address: _____ **Email**: _____

Nature of improvement: Please provide specific details, including photos, diagrams, statement of color(s), and other descriptions of the project including construction materials. Failure to provide specifics may result in deferral of the application's review.

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Supplier: _____ Contractor: _____

The plans and specifications showing the nature, kind, shape, height, materials and location are attached to this application. If approved, I agree to build in accordance with this application and the attached plans and specifications and I agree to maintain any improvements at my expense. All modifications/alterations will be completed within 12 months of approval. If they are not completed within 12 months, I will submit a new application/revised review form. Committee review of this application will be presented to the Griffin Gate Board of Directors for its approval and/or recommendations.

Signed: _____

Property Owner

Note: In the event that digging is required, KY Underground will track and mark all utilities prior to digging. Call 811 for more information.

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Committee Use Only Date Received: ____/ ____/ ____

Inspected By: _____ Inspected On: ____/ ____/ ____

Neighbors Contracted: _____

Approved **Disapproved** Date: ____/ ____/ ____

Remarks: _____

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