

**SUMMERLAKES HOMEOWNERS ASSOCIATION
3 SOUTH 020 CONTINENTAL DRIVE
WARRENVILLE, IL 60555
630-393-3033**

ARCHITECTURAL REQUEST / APPROVAL FORM

Submitted By: _____

Address: _____ Lot # _____

Daytime Phone: _____ Evening Phone: _____

Date Received: _____ Meeting Date: _____

Next Architectural Committee

Estimated Project Start Date, if Approved: _____

Project Description (Including type of project, materials, colors, etc. and any Homeowner comments regarding project): _____

Homeowner Signature _____

Architectural Committee Review:

Reviewed By (1): _____ (2): _____

(3) _____ Date Reviewed: _____

APPROVED _____ **DISAPPROVED** _____

Committee Comments: _____

For Office Use Only:

- _____ Two (2) copies of Plat
- _____ Project marked on Plat
- _____ Brochure/Pictures, etc.
- _____ Entire Packet Copied
- _____ Meeting Date Confirmed
with Homeowner
- _____ Original Packet to Committee

- _____ Committee Notified
- _____ Homeowner Notified of
Committee Action
- _____ Copy of Action Sent to Homeowner
- _____ City Notified
- _____ Original Filed