

Committee Pre-Approval Inspection:

Weaver Landing Homeowners Association WeaverLanding.com

Architectural Submission/Application Form

Owner (Applicant):					
Property Address:					
Phone:	one: Email Address:				
Contractor Information:					
Contractor Name:	ontractor Name: Contractor Phone:				
Contractor Email:		Projec	t Start Date:	Project End Date:	
Modification Request:					
Exterior Paint	D Pool	Roof	Other:		
Existing Color	Landscaping	Existing Color			
New Color	Patio/Deck	New Color			
Description of and reas	on for request:				
Complete mat	bmission Form the project, includi	ng height, width and ject, including paint :	depth, roofing ma	•	
Please send your reque	st to:				
Mike Konopinski, 2806 \	N. Wilson, Batavia,	IL 60510			
Phone: 630-740-5138, Er	mail: <u>weaverlandin</u> g	ghoa@gmail.com			
For Office/Committee Date Submission Received APPROVED 4 Stipulations/Comments/Sug	: APPROVED W/STIPUI	LATIONS 🔲 DENIEL		SUFFICIENT INFORMATION	

Committee Post-completion Inspection: