Shadow Ridge Neighborhood Association

9601 W. State St., Ste. 203 Boise, Idaho 83714 Phone (208) 939-6000 Fax (208) 939-6118

Shadowviewhoa@gmail.com

Architectural Committee—Application Form *This form must be filled out completely!*

Date: Homeowr	ners Name:				
Address:		Lot:	Block:	Phase:	
Email Address:					
Home Phone: Work P	hone:	Cell Ph	Cell Phone:		
Estimated Start Date: Estimated Date of Complete		on:			
Application for (please check one): ☐ New Construction Build Job			Is a building permit required for this project?		
Landscape Plan (must include picture of planned landscape placement)			☐ Yes (attach a copy of City of Eagle building permit)		
Remodel or Alteration (satellite dishes—must include size/color/placement of dish)		□ No	□ No		
Paint Change (must include color brand/color name/swatch)			**DI // I I // I		
Fence Installation (must include picture/fence type/s	ples/pic this for	**Please attach diagrams/color sam- ples/pictures/etc. Use other side of this form if additional room is need- ed.			
Roofing (must include manufacturer/color/material)					
Other:		-			
Contractor/Builder: Company:					
Address:	Phone: Em		nail:		
Description of Request:					
Homeowner Signature: Date:					
*By signing this application, I understand that a stand that this is an approval to comply with the safety, soundness, or legal aspect of the improved	approval from the Shado te CC&R's and in no way	w Ridge HOA y does this app	Board is requ roval have an	ired. I also under- y bearing as to the	
Date received by Committee:	Date reviewe	ed by Committee	e:		
☐ Further review necessary (see attached)	☐ Approve	☐ Approved with Conditions (see attached)			
☐ Approved as submitted	☐ Not appr	☐ Not approved (see attached)			
Attested By: Date:					
Majority Approval By:					
FINAL INSPECTION: Date BY:	APPROVED: COMMENTS:	NOT APF	PROVED:		