

Moonbeam

ARCHITECTURAL CHANGE APPLICATION

HOMEOWNER NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ LOT \_\_\_\_\_ BLK \_\_\_\_\_ PHASE \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

HOMEOWNER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Homeowners are required to submit project plans in writing prior to the start of any project for the consideration, review, and approval by the ARC.

NATURE OF REQUEST - ATTACH DETAILED PLANS FOR THE PROJECT

\_\_\_ NEW CONSTRUCTION \_\_\_ REMODEL OR ALTERATION \_\_\_ LANDSCAPING- NEW/MODIFIED \_\_\_ OTHER

\_\_\_ PAINT COLOR (Need color chips)

\_\_\_ FENCE Install/Modify (style, height, location/stain color to be \_\_\_\_\_.) All fences that can be seen from the

Road must all be stained the same color.

\_\_\_ ROOFING (shingle TYPE & color)

DESCRIBE SPECIFICS OF REQUEST (Attach additional sheet) **START DATE** \_\_\_\_\_ **FINISH DATE** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Contractor: \_\_\_\_\_ Address: \_\_\_\_\_ Phone \_\_\_\_\_

BUILDING PERMIT, IF NEEDED, MUST BE ATTACHED TO APPLICATION: YES \_\_\_\_\_ NO \_\_\_\_\_

DATE \_\_\_\_\_ APPROVED

DATE \_\_\_\_\_ APPROVED WITH CONDITIONS (Attached)

DATE \_\_\_\_\_ NOT APPROVED (See attached reasons)

ARC Signature \_\_\_\_\_ Date \_\_\_\_\_

ARC Signature \_\_\_\_\_ Date \_\_\_\_\_

ARC Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit to: DEVELOPMENT SERVICES, INC. 9601 W. State St. Ste #203, Boise, ID 83714  
Phone: (208) 939-6000 Fax: (208) 939-6118 E-Mail: Sara@dev-services.com