THE ENCLAVE OF CARMEL ARCHITECTURAL & LANDSCAPE CONTROL APPROVAL REQUEST

LOT#:	
NAME:	
ADDRESS:	
PHONE: Home	Cell:
Description of request:	tural Committee to approve the following:
Drawing/Sketch/Plot/Survey Please see Page 2.	Plan and description of Materials:
Estimated Starting Date:	Estimated Completion Date:
Owner's Signature:	Date:

- 1. Be a good neighbor and advise your neighbors of your intent to build your project.
- 2. Survey Property: Survey your property lines, stay within your property lines.
- 3. The homeowner further understands, acknowledges and agrees that any additions, improvements, repairs or alterations to his/her unit are the sole responsibility of the Homeowner and his/her heirs or future Homeowners shall be fully responsible for maintenance, repairs and upkeep on the same.

All plans, plat plans and any pertinent information need to be submitted with this form and sent to: The Enclave of Carmel Homeowners Association, Inc.

c/o Kirkpatrick Management Co., Inc. Attention: Brandon Joutras 5702 Kirkpatrick Way

Indianapolis, IN 46220

You may also fax or email to: Brandon Joutras (Community Association Manager) Fax # 317-558-5345 Email: bjoutras@ekirkpatrick.com

Drawing/Sketc	h/Plot/Survev	Plan and	description	of Materials:

(This area is for drawing a sketch of the changes you are wishing to make. If your changes involve changes to the architecture or footprint of your house, you need to submit the architectural drawing(s) for the change. Without this material the request cannot be reviewed and will be returned to the homeowner.)

*All materials used and improvements must meet Architectu	<mark>ıral Guidelines.</mark>
Reviewed by ACC::	_Date:
Request Approved by BOD:	Date
Materials Verification or Site Visit by ACC:	Date
Final inspection by ACC:	Date: