Northbrook Community Association
P.O. Box 2233
Boothwyn, PA 19061
northbrookhoa@aol.com

ARCHITECTURAL CHANGE REQUEST

TO THE APPLICANT: PLEASE COMPLETE THE FOLLOWING:

1. Name & address of the Unit Owner requesting the architectural change:

_____

_____

Daytime Phone: n/a_____ Evening: n/a_____

E-mail: _____

2. Date Submitted: _____

3. Proposed change: Provide a detailed description and reference how it complies with Architectural Request Guidelines (see website). Attach an additional sheet if more space is needed):

_____
_____
_____
_____
_____

Also attach additional information and documents, as applicable: plans and specifications with illustrations showing the nature, kind, shape, color, height, materials and location.

4. Proposed Completion Date: _____ (if applicable)

NOTE: Return this form or send questions to the above email address.

Date Received by Committee: _____

☐ Approved ☐ Approved with conditions (itemized below) ☐ Denied

Necessary revisions or comments:

_____
_____
_____
_____

Your signature : _____ Date: _____

Approval signature: _____ Date: _____