

## Architectural Review Application Form

**\*\*\*THIS FORM MUST BE FILLED OUT PRIOR TO ANY EXTERIOR MODIFICATION OR CHANGE TO YOUR HOME\*\*\***

Orenco Gardens Homeowners Association  
c/o Bluestone and Hockley  
9320 SW Barbur Blvd, Suite 300  
Portland, OR. 97219  
Fax (503) 222-6459

Date Submitted: \_\_\_\_\_ Expected Completion Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Modification Type:     Landscape                       Construction                       Other

Additional Information:

Please include a simple foot print drawing of where the work will be located on your lot in relation to your lot lines and home. If you plan to build any structures, please list the types of materials you plan to use, as well as the finish colors to be applied, and show the design of the structure.

Note that all construction and installation of any improvements shall comply with local, state, and federal building and land use regulations. Compliance with these regulations is the responsibility of the homeowner. This review and approval is not a review, nor an approval, for compliance with any local, state, or federal building or land use regulations.

Building, electrical, or plumbing permits may be required. The determination of the necessity of any permits is the responsibility of the homeowner. Obtaining any necessary permits is the responsibility of the homeowner.

Changes to the proposed plan necessitated by permits or compliance with local, state, or federal building or land use laws are subject to additional review by the Architectural Control Committee (ACC).

Please submit this application to the Management Company 30 days prior to beginning your project. The ARC will do all it can to have your application reviewed in a timely manner so as not to impede the timely completion of your project.

*Homeowner - do not write below this line*

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### Architectural Review Decision

Approved                       Approved with conditions                       Disapproved

Comments or Conditions to Approval: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_