

# CLV PLANS CHECK LIST

**Lot #** \_\_\_\_\_  
**911 Address** \_\_\_\_\_  
**Contractor:** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
**Member:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Construction Type**  New Home Construction  Home Addition  Building (Shed)  
 Fencing  Pool  Boat Dock  Deck  Garage Addition  
 Other (Describe) \_\_\_\_\_

**Description of Project** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Concrete  
 Asphalt

**Driveway**  Other \_\_\_\_\_

**Roof**  Shingle - Color \_\_\_\_\_  
 Metal - Color \_\_\_\_\_  
 Other - Color \_\_\_\_\_ Description \_\_\_\_\_

**Water / Drainage Plan Enclosed**  Yes  
 No  
 Not applicable (My plans will not affect property drainage in any way)

**Foundation**  Concrete / Slab  
 None (Free standing building)  
 Other (Describe) \_\_\_\_\_

**Siding** % Breakdown if more than one: % **Brick & Color** \_\_\_\_/\_\_\_\_ % **Vinyl & Color** \_\_\_\_/\_\_\_\_  
% **Stucco and Color** \_\_\_\_/\_\_\_\_  
 Not applicable (My plans will not require any siding)

**Square Footage** \_\_\_\_\_ Total square footage  
\_\_\_\_\_ 1st story | \_\_\_\_\_ 2nd story | \_\_\_\_\_ Basement \_\_\_\_\_ Garage

**Estimated Cost of Plans** \_\_\_\_\_

**Variance(s)**  
1. \_\_\_\_\_  
2. \_\_\_\_\_

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No variance(s) is requested.

**Estimated start date** \_\_\_/\_\_\_/\_\_\_ **Estimated Finish Date** \_\_\_/\_\_\_/\_\_\_

**Plans must include the following:**

1. Samples of literature provided on products being used, i.e. Siding, roofing, stone, etc.
2. All Utilities need to be clearly marked on plans.
3. Representation will be required at the meeting by either homeowner, builder, or representative that can answer questions.
4. All renderings of the structure.

This project is approved contingent upon its completion in accordance with these plans. The Association cannot be held responsible for the accuracy of the drawings. Should any variation occur which has not been approved by the Architectural Committee, the Association may require the structure to be brought into compliance, up to and including removal. It is the responsibility of the owner to be knowledgeable of any areas of the property where the use of the property is restricted (i.e., setback lines & easements). The Association cannot be held responsible for any encroachment violations.

**Scheduled Date for Review** \_\_\_/\_\_\_/\_\_\_ **Time & Location** \_\_:\_\_\_/\_\_\_

-----**SIGNED BY MEMBER AFTER APPROVAL**-----

X \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

**Construction must begin within 180 days from the notification date.**

**Notified** \_\_\_\_\_ **Expires** \_\_\_\_\_

-----**OFFICE USE ONLY**-----

**Dates**

<input type="checkbox"/>	Date plans are submitted	___/___/___
<input type="checkbox"/>	Date plans are ready for Board approval	___/___/___
<input type="checkbox"/>	30-day deadline date	___/___/___

**Deposits**

<input type="checkbox"/> Deposit required	_____	<input type="checkbox"/> No Deposit required	_____
<input type="checkbox"/> Fee	_____	<input type="checkbox"/> Refund Amount	_____

**Approve**

	<input type="checkbox"/> _____	___/___/___		<input type="checkbox"/> _____	___/___/___
<b>Board Signatures</b>	<input type="checkbox"/> _____	___/___/___		<input type="checkbox"/> _____	___/___/___
	<input type="checkbox"/> _____	___/___/___		<input type="checkbox"/> _____	___/___/___
	<input type="checkbox"/> _____	___/___/___		<input type="checkbox"/> _____	___/___/___

**Disapprove**

**Reason**

	<input type="checkbox"/> _____	___/___/___	_____
<b>Board Signatures</b>	<input type="checkbox"/> _____	___/___/___	_____
	<input type="checkbox"/> _____	___/___/___	_____
	<input type="checkbox"/> _____	___/___/___	_____
	<input type="checkbox"/> _____	___/___/___	_____