

6. FORMS

BLOODY POINT ARCHITECTURAL REVIEW BOARD FORM 6.1 APPLICATION FOR REVIEW

Submit to: _____

Owner:
Name _____
Address _____
Phone _____

Architect:
Name _____
Address _____
Phone _____

Landscape Architect:
Name _____
Address _____
Phone _____

Date _____
New House _____
Addition _____
Exterior Alteration _____

Construction Address:
Lot Number _____
Street Address _____

Builder:
Name _____
Address _____
Phone _____

Gross Dwelling Area (square footage)

1st Floor Heated _____
 1st Floor covered _____
 Project Total _____

2nd Floor Heated _____

2nd Floor covered _____

Conceptual Submitted Plan _____

Admin Fee Submitted Preliminary Plan _____

Submitted _____

Final Plan Approval _____

Bloody Point Use Only

_____ 6.2 Approval of Design for Const.
 _____ 6.3 Agreement Letter
 _____ 6.4 Clearing & Foundation Permit

_____ 6.5 Letter of Completion
 _____ 6.6 Certificate of Construction Acceptance
 _____ and Compliance Deposit Refund

_____ 6.7 Request for Construction
 _____ of Design Change

New Construction Damage Deposit \$ _____

Check # _____

Date _____

Clean-up & Compliance Deposit \$ _____

Check # _____

Date _____

Landscape Deposit \$ _____

Check # _____

Date _____

Other Required Deposit \$ _____

Check # _____

Date _____

EXTERIOR MATERIALS & COLORS: Specify type and manufacturer of materials. Please submit samples of colors on materials that will be used for final approval.

A Siding (wood masonry, Hardiplank):
Type &
Mfg. _____
Color _____

B Stucco
Type &
Mfg. _____
Color _____

C Brick
Type &
Mfg. _____
Color _____

D Roofing
Type &
Mfg. _____
Color _____

E Fascia, Trim
Type &
Mfg. _____
Color _____

F Lattice Panels
Type &
Mfg. _____
Color _____

G Shutters
Type &
Mfg. _____
Color _____

H Porch Ceiling
Type &
Mfg. _____
Color _____

I Columns, Handrails, Railings
Type &
Mfg. _____
Color _____

J Doors
Front _____ Color _____
Exterior _____ Color _____
Cart House _____ Color _____

K Windows & Trim
Type &
Mfg. _____
Color _____

L Chimney
Type &
Mfg. _____
Color _____

M Driveway
Type &
Mfg. _____
Color _____

Variations Requested: _____

Variations OK _____

I certify that I have read the current Bloody Point ARB Guidelines and Procedures, that I have complied with all parts of those Guidelines, and that the information presented above is true to the best of my Knowledge.

Applicant's Signature _____

Date _____