

**WOODRIDGE ESTATES HOMEOWNERS ASSOCIATION
ARCHITECTURAL CONTROL COMMITTEE
PROPERTY MODIFICATION REQUEST RESPONSE FORM**

DATE: _____

APPLICANT INFORMATION

NAME(S): _____

ADDRESS: _____

NEW HOME CONSTRUCTION: Yes ____ No ____

EXISTING HOME MODIFICATION: Yes ____ No ____

DESCRIPTION OF CONSTRUCTION/MODIFICATION (Please include—Square footage, linear footage, height and width as applicable to the project):

Photos/Drawings attached: Yes ____ No ____

Date Approved: _____

Approval signatures: _____