Arborwood/The Willows Homeowners' Association Architectural Review Committee Submittal Form

| Owner(s) of Record: | | |
|--|---|---|
| Phone (H): | | Phone (W): |
| Street Address: | | |
| City: | State: | Zip: |
| E-Mail Address: | | |
| Initial Submittal Re-Subm | ittal after Disapprova | al Re-submittal with Additional Information |
| Please provide a brillandscaping, and attach a specifications (type of m | it refundable after for to Arborwood/ Will be description of propall plans (site plan, but aterial to be used, columns) | ach submittal form, which needs to be two final inspection. Please make check or money flows and mail to the address below. cosed changes or additions to your home or ailding plans, elevation plans, set back lines etc.), flor, etc.), and any other materials that will assist space is required, please add additional pages. |
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| | | REQUIRED COUNTY PERMITS AND POSTING WHILE WORK IS BEING DONE. |
| Name of Contractor: | | Phone No.: |
| Submitted By: | | |
| Est. Completion Date: | | Send Request To: |
| Date Submitted: | | IMC Resort Services, Inc 181 Bluffton Rd Suite C-103 Bluffton, SC 29910 |
| Date Received: | | Fax: 843-785-3901 or e-mail to Nancy@IMCHHI.com |