Bailey Ranch Homeowners Association Architectural Change Request Form

Name: Property Address:		ddress:
Home Phone:	Daytime Phone:	Email Address:
Estimated Start Date:	Proposed Completion Date:	
Description of Proposed	Alteration, Change, or Re	placement:
General Description:		
Proposed Materials:		
Color: S	tyle: Type	e: Dimensions:
Location: (provide draw	ing or detailed description	as applicable)
Certification:		
Architectural Committe obtaining any and all neo ordinances. If approved the letter of approval. Al Association's property is	e or Board of Directors do cessary Building Permits, , I agree to make the chan- il changes will be on my p	Bailey Ranch Homeowners Association bes not relieve me of the responsibility for Variances, and observing all local zoning ges under the terms and conditions specified in roperty or property lines. If any portion of the my contractor, agent, or myself, I agree to ondition at my expense.
Applicant Signature:		Date:
Architectural Chairman:		Date:
Mail completed form to) :	
Bailey Ranch Homeown Attn: Architectural Con P.O. Box 952		

Email questions to: baileyranchhoa@yahoo.com

Owasso, OK 74055