

Name:

Address:

Chagrin Falls, Ohio

44023-5821

Home Phone Number: (440)

Date of submittal to Board:

Date work is to commence:

Date work is to be completed:

Contractor:

Phone:

Please attach a detailed drawing or sketch of any addition with this proposal. Include a detail of the elevation, floor plan, dimensions, and location on site as required.

Type of Improvement to be made:

- Alteration
  - Roof replacement if of different color &/or material. Describe type & color on next page and provide a sample.
  - Replace/Paint siding, paint trim, shutters, doors, etc. if of different color &/or material. State color of siding, trim, gutters, & shutters on next page & provide sample of the siding.
  - Replace windows if of different size &/or style.
  - Replace deck if of different size &/or style.
  - Replace driveway if of different dimensions &/or path.
  - Other
- Addition to existing structure
  - Room Addition: Drawings are required.
  - Porch/Deck Addition: Drawings are required. Provide full description on next page & attach drawings including dimensions, trim & location on site.
  - Garage Expansion: Drawings are required.
  - Swimming Pool/Hot Tub: Drawings are required.
  - Other: Drawings are required.
- Addition of new structure
  - Garden Shed: Drawings are required.
  - Fence/Hedge/Walls: Drawings are required.
  - Recreational Equipment
  - Animal runs &/or shelters: Drawings are required.
  - Other: Drawings are required.

Provide full description of all improvements on next page and on the back as necessary.

**Description of Improvement:**

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**Required Signatures:**

**Neighbors Acceptance:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_

**Current Architectural Review Committee:**

Name: \_\_\_\_\_  
  Alan Tatro  
Phone:                     (440) 543-8947  
Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Name: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
  Jim Kapiro  
Phone:                     (440) 708-2622  
Name: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Lake Colony Board:**

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Name: \_\_\_\_\_  
Phone: \_\_\_\_\_



(Seal)

**Bainbridge Township Acceptance:**

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Geauga County Acceptance:**

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_