

COVES NORTH HOMES ASSOCIATION

ARCHITECTURAL REVIEW REQUEST FORM

This form is to be completed and submitted to modifications.csc@fsresidential.com , or mail to
FirstService Residential, 11125 NW Ambassador Dr., Kansas City, MO 64153.
(Fax) 816-454-0661.

Please include all drawings, plans, and specifications with this request form.

DATE: _____

Homeowners or Builder's Name: _____

Address: _____

Telephone: _____ E-Mail _____

Address of Property: _____

Please check one:

☐

New Construction

Submit one copy of Building Plans and Specifications to be retained by the ARC. Include a dimensioned site section showing the relationship of proposed construction to existing structures.

☐

Renovation and/or Alterations

Submit a sketch and written description detailing proposed changes. Include all pertinent information.

**SAMPLES MATERIALS AND COLORS MUST ACCOMPANY ALL APPLICATIONS
(UNLESS TO MATCH EXISTING).**

If change to be made, please check each item to be changed or added:

☐ Roof

☐ Siding

☐ Painting

☐ Trim Paint

☐ Windows

☐ Fence

☐ Garage Door

☐ Painting Garage Door

☐ Dog Run

☐ Deck

☐ Patio

☐ Satellite Dish

☐ Landscaping

☐ Hot Tub

☐ Other

Brief description of change to be made (include size, height, **location on property**, material to use, paint, colors, etc):

If photograph available, please include -- also include samples of materials, paint chips, and sketch outlining change.

*Approval is good for 90 Days from the date of the approval letter. If more time is needed you will need to request an extension.

ARC recommends to the Coves North Board of Directors: DATE:_____

☐ Approved ☐ Disapproved

BOARD OF DIRECTORS: DATE:_____

☐ Approved ☐ Disapproved

Date ARC Request Form received:_____

By:_____