Amber Hills Estates Homes Association Architectural Review Committee Change Request Form										
To be submitted to:		Amber Hills Estates Homes Association c/o Homes Association Solutions, LLC P.O. Box # 26145 Overland Park, KS 66225-26145 or fax 913-825-0003								
Но	meowners Name:									
					Phone:					
Ad	dress of Property:									
					Mail Address:					
Type of change to be made: Please check (\checkmark) each item to be changed or added:										
	Basketball Goal		Hot Tub		Satellite Dish					
	Deck		Landscaping		Siding					
	Driveway		Painting		Swimming Pool					
	Fence		Patio		Swing Set					
	Gazebo		Roof		Other:					
Brief description of the change to be made: (A sketch or site plan must be attached.)										
Describe the materials to be used (If you are painting provide the paint pallet number):										
engi Olati	neering design or a	safety of sai it is the ho	d construction p meowners resp	project. A build onsibility to se	express any opinion regarding the strength, ling permit should be obtained from the city of e that the project is in compliance with all s.					
Amb	er Hills Architectu	ral Review	Committee:							
Approved		Disapproved			Approved if following changes are made to request:					

	Date Received:		Date Approved/Disapproved by A	RC:
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ARC form/3/11/04/dmc

By:

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