

**APPLICATION FOR SKETCH PLAN REVIEW**

**DATE:** \_\_\_\_\_

**PROPERTY OWNER(S):** \_\_\_\_\_

**BLOCK/LOT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY, STATE, AND ZIP:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

Include with this Application all materials and information described on the Sketch Plan Review: Checklist of Materials attached to these Architectural Controls. Your compliance fee is required to be paid prior to the ACC review to begin. Please review the SSC ARC Fees document for further information.

**ARB COMMENTS (Incorporate into the Final Plan Review):**

**DATE:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
OWNER(S)

\_\_\_\_\_  
CONTRACTOR

\_\_\_\_\_  
ARB

**ARB Representative**

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OWNER(S)

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CONTRACTOR

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ARB