Charbonneau's Country Club Estates

REQUEST FOR ARCHITECTURAL REVIEW; HOME & LANDSCAPE

TO:	FROM:
Rick Schram, CCE Property Manager Phone: 1-360-771-7998	Home Owner
Email: Rick@CharbonneauCountryClub.com	Ctroot Address
Email. Rick@CharbonneauCountryClub.com	Street Address
Address:	Phone Number
Attn: Rick Schram, CCE	Thore itemser
Charbonneau Country Club	Email
32000 SW Charbonneau Drive	
Wilsonville, OR 97070	Date Submitted:
77070	PLEASE PRINT CLEARLY
*Please drop this form off at the CCC office for review	
You will be notified by phone or email when the review is complete or if we have any questions.	
Briefly describe the proposed changes to you	r home and/or landscape plans.
Use back of form or additional pages as needed.	
Note: Tree removal requires a separate request form.	
	
Work to be performed by: [] Contractor []	Self; Project Start Date: Finish Date:
Signature of Home Owner:	
Enclose two (2) copies of this request with co	ppies of the blueprints or technical drawings reflecting the above
· · · · · · · · · · · · · · · · · · ·	e used and color samples attached (if applicable).
changes, together with hists of materials to be	s asea and color samples attached (ii applicable).
**** Please allow for adequa	te review time when submitting this request *****
For Office Use Only	
Date Reviewed: Rev	viewed By:
[] NOT APPROVED [] APPR	ROVED, [] APPROVED AS NOTED: