

Eagle Crossing Architectural Approval Request

Homeowner's Name: _____ Date: _____

Physical Address: _____ Home Phone: _____

Mailing Address: _____ Day Phone: _____
Fax: _____

Plan Description:

_____

_____

Desired Time Schedule: Start Date: _____ Finish Date: _____

Please show design in the area provided below and on a copy of your as-built survey. Include elevations, measurements, and relationships of the modification to your home. Please attach any relevant plans and/or specifications, such as your as-built survey or plot plan. (These should be in your loan closing documents.) Please consult the Eagle Crossing Governing Documents; Article XII (Section 12.1), and the CC&R's regarding building and landscaping approval requirements.

Please deliver your request to the Eagle Crossing Executive Board at 405 W. 27th Anchorage, AK 99503, or Fax to (907) 762-5497

Description of materials to be used:

_____

_____

_____

Note: Please attach samples of paint color and/or finish to be used. These will not be returned; they will be kept by the association, attached to this form.

Contractor's Name: _____

Contractor's Phone(s): _____

Additional Comments: _____

_____

☐ **Request Approved** (Must be approved by majority of committee members):

☐ **Request Denied**

_____ _____

_____ _____

_____ _____

Note: Please be advised that the Municipality of Anchorage has independent authority to enforce building codes and may require a building permit to be issued. The homeowner is responsible for presenting their design to the MOA, Building Safety Division, for their approval prior to construction as required.

Committee Comments:

_____

_____

_____

Signature of Committee Chairperson (or Acting Chairperson):

_____

Date of Approval / Disapproval: _____

Date Copy Returned to Homeowner: _____

The Eagle Crossing HOA retains original of this two-page document, plus attachments. A copy will be returned to the homeowner for their records. Please allow up to 30 days for committee review and approval. (Rev. 1/05)