

**Beacon Pointe Subdivision
Architectural Review Committee**

Application for Building Permit

Date Submitted: _____ Lot Number: _____

Property Owner: _____ Cell Number: _____

Address: _____

Builder: _____ Cell Number: _____

Proposed Date for Start of Construction: _____

Square Footage:		Materials:	
Entry Level	_____	Exterior	_____
Upper Level	_____	Exterior	_____
Lower Level	_____	Exterior	_____
Garage	_____	Roofing	_____

Colors:
Structure _____
Trim _____
Roofing _____

Other		
Current Certified Survey	Y	N
Walkways & Steps noted on site plan	Y	N
Lift pump on site plan	Y	N
Driveway with dimensions on site plan	Y	N
Culvert necessary	Y	N
Retaining walls on site plan	Y	N
Setbacks noted on site plan	Y	N
Damage deposit paid	Y	N

Date

Builder Signature

Owner: Please have builder sign and return to an Architectural Review Committee member.