



NOTICE OF COMPLETION

OF ARCHITECTURAL IMPROVEMENTS

Homeowner			
Name:		Date Work Completed:	
Property Address:	City:	State:	Zip Code:
BRIEF DESCRIPTION OF IMPROVEMENTS:			

NOTE: Please submit this form **within 15 days** of completion to let the Architectural Committee know when approved improvements are completed. The Architectural Committee may make a final inspection of the improvements to confirm conformity to the approved plans.

Signature	
Homeowner:	Date:

Architectural Committee Use Only	
Signature of ARC Member:	Date:
<p>The Architectural Committee has made a final inspection of the improvements and find that the improvements:</p> <p><input type="checkbox"/> ARE in conformity with the approved plans.</p> <p><input type="checkbox"/> ARE NOT in conformity with the approved plans; specifically:</p>	