



Si View Architectural Control Committee Review Form

Date Received: _____

Name: _____

Address: _____

Telephone: (Home) _____ (Work) _____

Email Address: _____

Description of Work: _____

Please attach a copy of all diagrams, plans and photos (if available)

Estimated Start Date: _____ (Within 6 months of approval)

Estimated Completion Date: _____ (Within 12 months of approval)

ACKNOWLEDGMENT OF PROPERTY OWNERS WHO ARE AFFECTED:

Note to Property Owners Affected: Your signature does not constitute nor indicate approval / disapproval, but merely indicates an awareness of applicant’s intent. If you have any CONCERNS with this application, please notify the A.C.C. in writing (email will be accepted at archreview@siviewhoa.info) within seven days of your signature date.

Name: _____ Address: _____ Date: _____

Name: _____ Address: _____ Date: _____

Name: _____ Address: _____ Date: _____

Name: _____ Address: _____ Date: _____

Name: _____ Address: _____ Date: _____

FOR A.C.C. USE ONLY

Approved as submitted ACC has reviewed plans/colors/etc. **Date Reviewed:** _____

Approved with conditions (see below)

Disapproved (see below)

Initials of ACC Members: _____

(Minimum of 2 required)

Note: Approval by the ACC does not preclude obtaining any required building permits. Please contact the City of North Bend for more information regarding requirements, etc.