



Si View Architectural Control Committee Review Form

Date:

Name:

Address:

Phone (Home):

Phone (Cell):

Email Address:

Description of Work:

Estimated Start Date:

Estimated Completion Date:

Notified Neighbors

List Name and Phone Number of Neighbors Contacted

Name:

Address:

Name:

Address:

Name:

Address:

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.

FOR A.C.C USE ONLY

Approved as Submitted

ACC reviewed plans/colors/etc. **Date Reviewed**

Approved with conditions:

Disapproved:

ACC Initials:

ACC Initials: