

# The Gardens of Oak Hollow

## Design Review Application

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Date Submitted: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

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Description of work (provide pictures or examples as necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Materials to be used (provide samples of all new materials and colors):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Proposed Start Date: \_\_\_\_\_ Proposed Completion Date: \_\_\_\_\_

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Design Review Committee Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved          Approved with Changes

Resubmittal Required          Not Approved

Date: \_\_\_\_\_ Signatures: \_\_\_\_\_

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Board of Directors Comments:

\_\_\_\_\_

Date: \_\_\_\_\_ Signatures: \_\_\_\_\_