

Architectural Review Committee Action Notice				
Lot # 				
	Name:	Address:	Phone / Fax / Email:	
Owner:				
Architect:				
Engineer:				
Landscape Architect:				
Schematic Review:				
	Name:			
Submittal Received Date:				
Review Date:				
Reviewed by:				
Site Plan	Approved	Rejected	See Notes	Comments
North Arrow:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lot Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Setback / build-to dimensions:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Building Footprint (with appendages)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fences / Street Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Drives / Walks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Site elevations noted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Building FFE's (MSL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Views	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Drainage Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Floor Plans	Approved	Rejected	See Notes	Comments
Calculated Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Dimensions noted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Room names and dimensions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Overhangs, stoops, porches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Architectural Review Checklist

Exterior Elevations	Approved	Rejected	See Notes	Comments
Architectural Elements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Architectural Proportions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Exterior Materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Window Design / Proportions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Roof Design and Pitches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Total Height	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ceiling Heights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other Exhibits				
Other Exhibits	Approved	Rejected	See Notes	Comments
Variance Request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Photographs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Additional Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Application Fee Submitted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Design Review Fee Submitted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Construction Performance Deposit Submitted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Design Review Fee Submitted				
Review Conclusion	Proceed	Resubmit at CD	Resubmit/Charge	Comments
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Signature and Date of Reviewer:				