## Cove Lake Subdivision, Inc. P.O. Box 826 Redan. GA. 30074 Telephone, 678-418-5277 Email, <u>covelakedekalb@yahoo.com</u>

## Board of Directors/Architectural Control Committee APPROVAL PROCESS FORM

Name:			
Phone Home	Work	Email	
Lot Number			
I, manner briefly described below.	, request approv	al to add, change, or alter my property located at the address	s above in th
have submitted a complete se	t of plans, which include specifi	cations, as the covenants require, (Attached to this form v	vhen necess
Plan Start Date	X	Date	
Homeowner Signature			
Date Request Submitted with Pla	n and Specifications		
- -			
Date Request Received			
Date Request Received	rectors/Architectural Control Co		
Date Request Received Recommendation of Board of Dir Approve	rectors/Architectural Control Co Disa,	nmittee	
Date Request Received Recommendation of Board of Dir Approve	rectors/Architectural Control Co Disa,	nmittee	
Date Request Received Recommendation of Board of Dir Approve	rectors/Architectural Control Co Disa,	nmittee	
Date Request Received Recommendation of Board of Din Approve Conditions and/or Recommendat	rectors/Architectural Control Co Disa,	nmittee  pprove	