

# Cannonsire Architectural Change Application House Additions

Provide the following information

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

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

Phone Number: \_\_\_\_\_

## PROJECT INFORMATION

Contractor to build / Doing the work yourself (Circle one)

Contractor Name (if applicable) - \_\_\_\_\_

**Design – Provide a detailed drawing of the plans for your addition, being sure to include the position where your addition will be placed on your home.**

Siding – Color - \_\_\_\_\_  
Size/Style - \_\_\_\_\_

Shingles for Roof - \_\_\_\_\_  
\_\_\_\_\_

Pitch of Roof - \_\_\_\_\_

Covering Around Base - \_\_\_\_\_  
\_\_\_\_\_

---

**RETURN TO** Architectural Review Committee or  
Board Member – See most recent  
newsletter for Addresses

**DATE RECEIVED:**

---

**RETURN THIS APPLICATION PRIOR TO THE THIRD TUESDAY OF THE MONTH TO BE REVIEWED AT THAT MONTH'S MEETING OF THE ARCHITECTURAL REVIEW COMMITTEE. PLEASE NOTE THAT THE COMMITTEE HAS UP TO 60 DAYS TO REVIEW**

---