

Architectural Submission/Application Form

Owner (Applicant):				
Property Address:			Zip:	
Contractor Information:				
Contractor Name:				
Project Start Date:/	Project End Date:/	_/		
Contact information should the	e Committee wish to contac	ct you for additio	onal information (please circle one):	
Phone: Home)	Work	,	Cell)	
Mailing Address (if different than	n above):		Zip:	
Email Address:				
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Description of and reason for r	equest (**Required**):			
Is this request in response to a	violation letter we sent you	1? Yes No		
Please make sure you have attach	ned/included all of the follov	ving information:		
☐ A description o ☐ A complete man ☐ A picture or dra ☐ links to website ☐ A site plan show	of the project, including heighterials list of the project, including of the intended/existing of the intended/existing the location of the house	ht, width and deptiluding paint samping project (sketchesse along with any	the Owner Acknowledgement notice on next of the theorem the theore	ta or
Please send your request to:	SI Management 1016 W. Sanetta St. Nampa, ID 83651		Phone: 208-965-8836 Website: simanagementllc.com Forms can also be submitted via email at: properties.si@outlook.com	
For Office/Committee Use O	nly:			
Date Submission Received:	OVED W/STIPULATIONS	☐ DENIED	☐ DENIED – INSUFFICIENT INFORMATI	ION

Committee Post-completion Inspection:

Committee Pre-Approval Inspection: