

<u>ARC REVIEW</u> FOR HOMEOWNERS

Applica	nnt Name:		
Home A	Address:		
Neighbo	orhood:		
Phone Number:		Cell Number:	
Fax Number:		_Email:	
determi		ls to be submitted to the Community Development Depa licant has submitted all required materials, the project wil g.	
REQUI	IRED MATERIALS		
		form with one paragraph stating the unique circumstances de the color palette or design guidelines	requiring
	If a mid-block house, 2 photographs of house from street		
	If a corner house, 4 photographs, including ones from second street		
	Photograph(s) of adjacent house(s) to either side of the house in question		
	For new paint colors, a colocation of new colors.	drawing or marked-up photograph of the house showing th	e proposed
	For new paint colors, act back.	tual paint sample or chips with City Color Palette Number	written on
	For a metal roof and other	ner new materials, a small sample.	
	For a metal roof, actual p	paint samples or chips with City Color Palette Number writers.	itten on back
AND			
	_ If new paint colors, a co	empleted building color application with desired colors.	
	_ If a metal roof, a comple	eted metal roof application.	
Signatu	re of Applicant	Date:	
Verified	d as Complete by City staff:		
Name:		Date:	

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REASON FOR EXCEPTION

Submit with ARC REVIEW for Homeowners

Applicant Name:	
Home Address:	
Reason for Exception:	