

**Application for Architectural Review**

**CLWII-Architectural Control Form-Traditional**  
**Mail or take to Joel Kray, 1679 Country Hill Ln, Manchester, MO 63021**

Date Submitted \_\_\_\_\_ Review Date \_\_\_\_\_

Countrylane Woods II Homeowners' Association --- Architectural Control Committee (ACC)

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**Note: Site/plot plan and product brochures if available must accompany request and approval/disapproval will be completed within four (4) weeks of submission.**

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Property Owner \_\_\_\_\_ Address \_\_\_\_\_

Applicant's Name \_\_\_\_\_ Phone # \_\_\_\_\_

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

**Fence Review**

Height \_\_\_\_\_ Length \_\_\_\_\_ Material \_\_\_\_\_ Color \_\_\_\_\_

Site/plot plan, elevations must accompany request.

**New or Replacement Decks/New Constructions/Additions Review**

Description of construction \_\_\_\_\_

Site/plot plan, elevations, and product brochure must accompany request.

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I/We hereby give permission to any Architectural Committee Member to come on our property to inspect what we have submitted for approval

Name \_\_\_\_\_ Date \_\_\_\_\_

**Architectural Control Committee Approval** (Must have at least three signatures)

**Appeal of disapprovals to be with the Board of Trustees. Work not to commence until approved.**

Approved \_\_\_\_ Not Approved \_\_\_\_ Reason \_\_\_\_\_

Signature \_\_\_\_\_ Approval No. \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

**Responsibility of homeowner to obtain all necessary permits based on work being done.**