



Indian Lake Homeowners Association, Inc.
PO Box 7006
Destin, FL 32550

Web: www.indianlakedestin.com
Mail: president@indianlakedestin.com

**ARCHITECTURAL CONTROL COMMITTEE
APPLICATION FOR REVIEW**
arc@indianlakedestin.com

Date of Application: _____

Applicant's Name: _____

Property Address: _____

Applicant's Telephone: _____

Contractor's Name: _____

Contractor's Address: _____

Contractor's License #: _____

Approximate Cost of Project: \$ _____

Brief Description of Project: Describe the alteration, improvement, addition or other change you would like to make to the exterior of your home. Include such details as dimensions, materials, colors, design location and other pertinent data. (Continue on back if needed.)

Attach copy of plans and drawings.

I hereby request approval by the Architectural Control Committee of the project described above. I understand that construction or work may not begin until project is approved. I acknowledge that it is my responsibility to obtain any and all permits required by local and state laws.

(Applicant's Signature)

(Date)

Date accepted for consideration: _____

Accepted by: _____

APPROVED _____

DISAPPROVED _____