

BATCHELOR HEIGHTS HOMEOWNERS' ASSOCIATION
Architectural Design Form
Approval Application
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Date _____ Lot # _____

Homeowner _____

Address _____

Telephone Number _____ Work _____ Cell _____

Architect or Contractor (If applicable) _____

Address _____

Business Telephone Number _____

Proposed Start Date _____ Completion Date _____

RESULTS OF ARCHITECTURAL DESIGN COMMITTEE'S REVIEW OF APPLICATION

ADC Members in attendance: 1. _____ 2. _____

3. _____ 4. _____

Application is:

- () Approved as presented – See attached letter from ADC
- () Conditions of Approval – See attached letter from ADC
- () Disapproved and returned to owner – See attached letter from ADC with reasons



FOR ADC USE ONLY

ADC Date Received _____ By Whom _____

Approval/Disapproval to Applicant: Date _____ By Whom _____

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As the requesting homeowner, I understand and agree to the following:

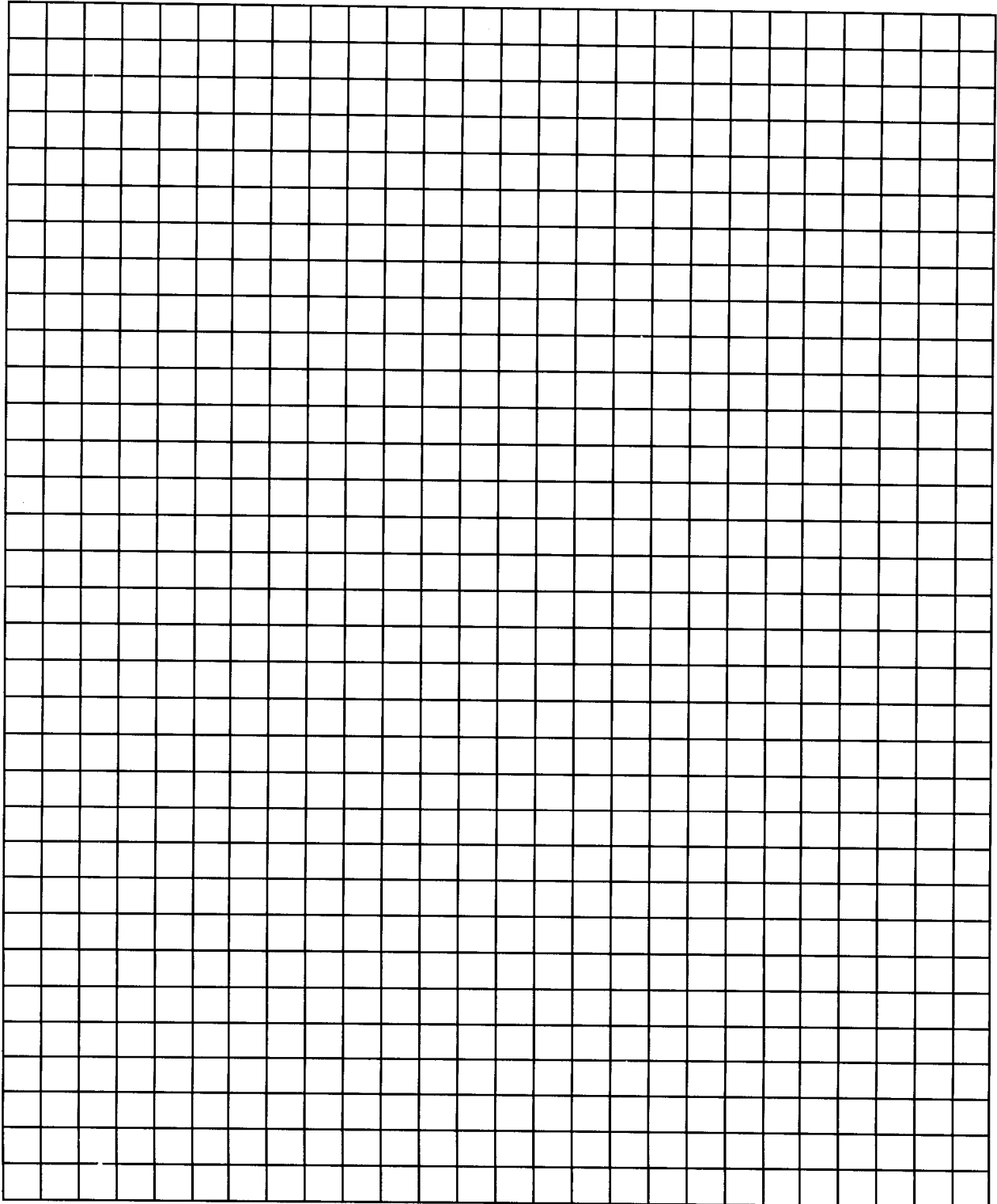
1. **Work:** No work pertaining to this request shall commence until I have received written approval from the Architectural Design Committee (ADC).
2. **Completion Date:** All work and improvements approved by the ADC must be completed within ninety (90) days after approval. Failure to complete the work within the prescribed period of time will cause the approval to be rescinded and resubmission will be required. Any extenuating circumstances for an extension should be brought to the attention of the ADC.
3. That the "Conditions of Approval" Section of the Architectural Standards shall apply to any approval, and the conditions must be met prior to commencing work.
4. That I will also be aware of the following:
 - a. Neighboring homeowners affected by the improvements (those on either side, in back of, in front of, or opposite to me) must be advised of all proposed work.
 - b. Should any homeowner disapprove, they may so indicate on this form or may send a written communication to TEMPO Properties, Inc. at the addresse below.
 - c. An impacted homeowner does not have veto power over the proposed project; rather, the concerns are a factor to be considered by the ADC.
 - d. Unoccupied neighboring homes must be signed off by the property holder.
 - e. Homeowner Association dues are paid in full.
 - f. Remember to check with utility companies before digging.

**THE PRINTED NAME AND SIGNATURE MUST BE ENTERED
 ON THIS FORM IN THE INDICATED SPACES BELOW**

Signature of Owner(s)				Date
(Right Side) Neighbor's Name and Address	()	()	Yes	No
				Signature
(Left Side) Neighbor's Name and Address	()	()	Yes	No
				Signature
(Rear Side) Neighbor's Name and Address	()	()	Yes	No
				Signature
(Front Side) Neighbor's Name and Address	()	()	Yes	No
				Signature

Please return these three completed pages to: **Name:** TEMPO Properties, Inc.
Address: P.O. Box 426, Bloomington, IN 47402
Phone: 812-336-2026; FAX: 812-336-0678

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1 Square equals approximately 1/4"