



# *The Harbours Condominiums*

One Riverpointe Plaza  
Jeffersonville, IN 47130  
Office: 812-288-1100  
[www.theharbours.com](http://www.theharbours.com)  
[callen@ekirkpatrick.com](mailto:callen@ekirkpatrick.com)

## ARCHITECTURAL REVIEW APPLICATION

Please FILL OUT COMPLETELY and submit this application, diagrams or drawings, and plat plans to the Property Manager at the above address. NO REQUEST WILL BE CONSIDERED UNLESS COMPLETE. The Board of Directors or assigned committee, prior to the Board of Directors, will review the request and approve or disapprove this application at the next scheduled meeting.

Please review The Harbours' governing documents before submitting this form.

PROPERTY OWNED BY: \_\_\_\_\_

UNIT: \_\_\_\_\_

PHONE NUMBERS (if there are questions we must be able to contact you): \_\_\_\_\_

I WISH TO RECEIVE NOTIFICATION OF APPROVAL/DISAPPROVAL BY: (PLEASE SELECT ONLY ONE OPTION)

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

Postal Mail: \_\_\_\_\_

EVALUATION: (Sketch design and description if necessary; manufacturers literature is welcome) 1. Indicate an anticipated start and completion date; changes/additions must be completed within 30 days of project start date 2. Include front and side view elevations with dimensions 3. Show the location of any existing utilities (if applicable or in close proximity) 4. Secure building permit(s) required (if applicable).

NATURE OF IMPROVEMENT: Attach plat plan, diagrams or drawings to help explain.

CONTRACTOR NAME AND PHONE NUMBER (if applicable):



TYPE OF MATERIALS, DIMENSIONS/COLOR (if applicable):

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ESTIMATED START DATE: \_\_\_\_\_

ESTIMATED COMPLETION DATE: \_\_\_\_\_

NOTICE: Approval of any addition/alteration/change/structure by the committee is in no way a certification that the structure has been constructed in accordance with government rules or codes. Owner agrees to hold harmless the Association for any responsibilities in completing this request and agrees to adhere to any conditions the Board has set for the repair.

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Signature of Applicant      Date

**Office Use Only**

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Approved or Denied                      Date                                      By Harbours Board of Directors

Additional Remarks and conditions:

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Date Received: \_\_\_\_\_

Owner Signature with conditions: \_\_\_\_\_

Date inspected by PM for conformity: \_\_\_\_\_                      Pass \_\_\_\_\_                      Fail \_\_\_\_\_

Please submit 30 days prior to project start.