

Date: _____

- LAKE CHRISTOPHER HOMES ASSOCIATION -

ARCHITECTURAL REVIEW REQUEST (Revised 5-1-07)

rrom.		ni .
		Phone
	e-mail	
To:	Lake Christopher Homes Association	
	The Select Group, Inc	
	2224 Virginia Beach Blvd Suit	es 201/202
	Virginia Beach, VA 23454	
	Phone: 757-486-6000 Fax: 757	7-486-6988
	e-mail: select@theselectgroup.u	us
Subj:	Architectural Review Request	
	1. As required by the Lake Christopher Architectural Guidelines I would like to have	
	this request considered for review by the Architectural Committee.	
	2. The following information is provided to aid the committee in the review of my request:	
Gene	ral description of work being requ	ıested
(checl	x as applicable and enclose/attach	any additional information)
D	etailed drawings, plans, sketches	or plat showing boundaries
Vinyl siding, and/or trim sample (must include color name and style)		
C	olor sample for painting (must in	clude names of colors)
Sa	ample of roof shingle material	
_0	ther samples and information as a	applicable (windows, doors, fences, etc)
		-
Signa	ture of homeowner	