

Managed by: Meridian Management Corporation PO Box 44127

Indianapolis IN 46244

Phone: (317)262-4989; Fax: (317)262-5212 Email: sstone@meridianmgmtcorp.com

Architectural Review Committee - Homeowner Request for Change

In addition to this application, please include:

- a) A site or plot plan indicating size and location of improvement and measurements relative to all property and easement lines.
- b) If available, blueprints or working drawings or sketches.
- c) If available, a photograph or drawing/sketch of a similar completed improvement.

Worksite Property Address:		
Homeowner Name		Address
_()		
() Telephone (Area) XXX-XXXX	Email Addres	S
Briefly describe the proposed improvement:		
Improvement Schedule:		
a) Work will be done by: Homeo	owner Con	tractor Name
Or both: Specify who will do	what work	
b) Indicate the approximate amo	unt of time requ	nired to complete the improvement:
c) Indicate all necessary permits	:	
NOTE: All submitted materials sl You may wish to make a		property of the Liberty Creek Association, Inc. personal records.
I hereby acknowledge that I have the Declaration of Covenants and		stand the Architectural Control guidelines as stated in and Regulations.
Homeowner's Signature Date		
Return to Liberty Creek South c/o OR Email to: libertycreeksouthho		agement; PO Box 44127; Indianapolis, IN 46244
APPROVED DENIED	By:	Date:

Revised 09/2018