



Managed by:
 PMI Meridian Management
 PO Box 44127
 Indianapolis IN 46244
 Phone: (317) 262-4989; Fax: (317) 262-5212
 Email: Phil@pmimeridian.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 Address

Briefly describe the proposed improvement:

Improvement Schedule:

- a) Work will be done by: Homeowner ____ Contractor Name _____
 Or both: Specify who will do what work _____

b) Indicate the approximate amount of time required to complete the improvement: _____

c) Indicate all necessary permits: _____

NOTE: All submitted materials shall remain the property of the Liberty Creek Association, Inc.
 You may wish to make a copy for your personal records.

I hereby acknowledge that I have read and understand the Architectural Control guidelines as stated in the Declaration of Covenants and relevant Rules and Regulations.

Homeowner's Signature _____ *Date* _____

Return to Liberty Creek South c/o Meridian Management; PO Box 44127; Indianapolis, IN 46244
 OR Email to: libertycreeksouthhoa@gmail.com

APPROVED ____ DENIED ____ By: _____ Date: _____