BUTTERFIELD PLACE II HOMEOWNER ASSOCIATION MATTESON, IL 60443 ARCHITECTURAL IMPROVEMENT APPLICATION

NAME:	DATE:		
ADDRESS:	TELEPHONE:	EMAIL:	
NATURE OF IMPROVEMENT:	:		
COLOR(if applicable):	STYLE (if applicable) :		
LOCATION:	DIMENSIO	DIMENSIONS:	
CONSTRUCTION MATERIALS	SApproximate Cost (Option	nal): \$	
		J.U.L.I.E. DIG #	
location and dimensions. Said play applicable, showing the exact local IMPERATIVE that you contact to Drive or 708.283.4900 to request a Board Approval via the signed Blobtained from the Village and a covillage of Matteson with your requanagement office, upon receipt, hours for Board Approval, if all radditional twenty-four (24) hours A copy of the contractor's Certificapplicable. IT IS IMPERATIVE marking underground facilities) (applicable. Illinois state law requirements)	ans and specifications shall include ation of the improvement on the H the Village of Matteson Building D a Permit, if applicable, and requir FII Architectural Improvement Application copy of the Board approved Application quest for a Permit. Please forward for the Association files/records. The application of the a	Department at 4900 Village Commons red by the Village. You must receive pplication BEFORE the Permit is cation should be forwarded to the a copy of the Permit to the ** Please allow up to seventy-two (72) and if submitted on the week-end, an ation to: epm1@att.net. "must accompany this application, if ACTOR CONTACT J.U.L.I.E. (for the start of construction, if or project that requires digging,	
I/We, the undersigned, do hereby improvement. We agree to abide	acknowledge that we understand	the rule concerning the proposed set forth by the Butterfield Place II	
Signed:	Date:		
	. HUA Uwner(s)		
FOR OFFICE USE ONLY: Approved By: Inspected By: Inspected On:	Date Application Received Received By:	l:	

Reasons for Disapproval: _