## River Downs Homeowners Association, Inc. Architectural Review Form

							(	_ (leave blank, assigned by Board member)												
								, (print) Date:												
Owner of Street #						_	Street Name													
Email:							or phone #													
Confid	denti	al:			or	Sha	are v	with	ı HO	DA:										
Des	scrip	tion	of pr	ojec	ct:															
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Action	n or F	⊥ Reply	v bv	the	Boa	rd:														