

INDIAN LAKE CLUB, Inc.
ARCHITECTURAL CONTROL COMMITTEE
Review Worksheet

Plans for: Owner's Name _____
 Lot ____ Section ____ Site Address _____
 Contact Mailing Address _____
 City _____ State _____ Zip _____
 Email address _____
 Phone _____ Cell _____
 Phone _____ Cell _____

Builder's name _____ Cell # _____
 Builder's e-mail _____ Fax # _____
 Emergency contact _____ # _____

Indicate all items required for project with a check mark:

Plot Plan: Lot Clearing Only ____ Addition ____ Dock ____ Proposed Home Site ____
 House Plotted ____ Septic System ____ Deck ____ Driveway ____ Silt Fence ____

Note: If silt fence is required for project, it must be installed before any work begins.

Date Worksheet Rec'd from Owner/GC: _____ Impact Payment Amt Received: _____
 Date of Conditional Approval _____ or Rejection _____

Comments: The committee recommends home be pinned out by a surveyor.

Building Plans: Site Plan with Setbacks: ____ Elevations included ____ Roof pitch ____
 Lot Clearing ____ Septic ____ Driveway ____ House ____ Addition ____ Deck ____ Dock ____
 Construction Type: Conventional ____ Modular ____ Kit ____

House Total Square Footage _____ Main Floor Square Footage: _____
 (House total square footage must be at least 1200 sq. ft. Main floor must be at least 900 sq. ft.)

	Material/composition	Color	Sample attached
Foundation/basement			
Siding			
Trim/Accents			
Roof			
Deck			

Date of Conditional Approval _____ or Rejection _____

Comments:

Committee: Michael Gould (Chair) _____ Aleta Tisdale _____ Chris Bartol _____
 Michael Gould contact info: mgould@thermopro.com 678-520-7559 (cell)

County Septic Permit # to be added as received _____

Building Permit # to be added as received _____

Date sub'd to Board for Final Approval: _____ Date of Final Approval _____

Date of Final Rejection _____