

ARCHITECTURAL IMPROVEMENT APPLICATION  
PARK VIEW OWNERS' ASSOCIATION  
17 Lincoln Avenue Eldridge, IA 52748 563-285-7804  
www.parkviewiowa.org

Property Owner's Name: \_\_\_\_\_ PHONE: \_\_\_\_\_

Address: \_\_\_\_\_

DESCRIPTION OF IMPROVEMENT \_\_\_\_\_

COLOR ( If applicable) \_\_\_\_\_

**LOCATION\*** \_\_\_\_\_

DIMENSIONS (If applicable) \_\_\_\_\_

CONSTRUCTION MATERIALS (If applicable) \_\_\_\_\_

BUILDING PERMIT NEEDED? YES NO (Circle one)

**Scott County Planning & Development Signature** \_\_\_\_\_

\*NOTE: A written plan ( **drawing, diagram, survey, photograph, etc.**) which reasonably demonstrates the location of your planned improvement **MUST** be attached to this application or your application will be **DENIED**. If you have a document that sets out the plans and/or Specifications of your project, please attach a copy of it as well. Please submit to the committee at least **30 days** in advance.

I hereby Request approval of the above referenced planned improvement.  
If approved, I agree to build in accordance with this application and the attached plans and specifications and I agree to maintain any improvements at my expense.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

(The owner/applicant is solely responsible for complying with all the building codes and regulations and locating their improvements so as to adhere to all property boundaries. Approval of a plan by the Board or Architectural Committee shall NOT be construed as an expression of any opinion as to compliance with any building codes or regulations or the placement of improvements in adherence to property boundaries. Unless otherwise stated in the remarks section below, all improvements must comply with all of the provisions of the Restrictive Covenants. The board is not responsible for lost or delayed mail with respect to applications.

**Below is for internal use only**

Date Received: \_\_\_\_\_ Date Reviewed \_\_\_\_\_

Decision: **APPROVED / DENIED** Please contact Planning & Development @ 326-8643 to verify all plans submitted.

Date faxed from Homeowners association Architectural committee to Planning & Development \_\_\_\_\_

Remarks: \_\_\_\_\_

Board /Committee Signatures \_\_\_\_\_

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Board Committee Signatures \_\_\_\_\_