

Lake in the Clouds, P.O.A.
Construction Approval Certificate Application- Schedule B

Contractor/Builder: _____

Address: _____

City, State, Zip _____

Telephone () _____ Fax () _____

Insurance _____

Property Owner Name and Lot # _____

Address: _____

City, State, Zip _____

Telephone () _____ Alt. # () _____

Dates Received:

Building Plans _____ **Site Plan w/driveway location** _____

Sewage Permit # _____ date received _____

Building Permit # _____ date received _____

Property Survey with location of pins – Signature _____
(property owner must sign and date to confirm pins are located and visible)

Exterior Color Scheme _____ Approx. sq. ft. living area _____

Drain Pipe required Yes _____ Size of pipe _____ No _____

LITC Building Fee (\$100.00) _____ Chk # _____

Please be advised that the LITC POA BOD requests all outdoor construction projects start no earlier than 8:00 AM and end no later than 7:00PM. These hours were arrived at in consideration of our neighbors and the community as a whole so as not to create a nuisance.

I have read the attached Schedules A & B and Rules and Regulations pertaining to construction.

Date _____ Signature _____

Date _____ Approved by _____

Member in good standing YES _____ NO _____