



THE TOWNSHIP AT COLONY PARK TND

Ridgeland, Mississippi

Architectural Review
Schematic Review Request Form

LOT NUMBER : _____

LOT OWNER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

ARCHITECT

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

LANDSCAPE ARCHITECT

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

BUILDER/CONTRACTOR (IF SELECTED)

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

This request is accompanied by:

_____ Site Plan (2 sets)

_____ Floor Plan(s) (2 sets)

_____ Exterior Elevations (2 sets)

_____ **Design Review Application Fee**

_____ **Design Review Fee**

_____ **Construction Performance Deposit**

_____ **Resubmittal Fee**

LOT OWNER SIGNATURE

DATE