

EAGLESGATE COMMUNITY ASSOCIATION
DESIGN REVIEW COMMITTEE

Construction Change Request

Lot Number: _____ Street Address: _____

Builder/Contractor: _____

Date of request: _____

CONSTRUCTION CHANGE REQUESTED (please check relevant items):

- _____ Site plan
- _____ Lot grade
- _____ Exterior material or colors
- _____ Floor plan
- _____ Doors or windows
- _____ Landscaping
- _____ Adding deck or fence
- _____ Other

PLEASE DESCRIBE IN DETAIL THE CHANGE REQUESTED: How it will change the home's appearance, size, placement on lot, etc. and the project completion date? Attach sketches, drawings, or photos to illustrate the change.

Signature: _____ Date: _____

Printed Name: _____

Please send this form to the DRC in care of **Club Management Services**.

By mail: **Club Management Services**
Attention: Eaglesgate DRC
4730 S. National Ave. Suite A1
Springfield, MO 65804

By Email: eaglesgatedrchair@gmail.com