ISLAND WEST

ARCHITECTURAL REVIEW APPLICATION

FENCE

DATE SUBMITTED			
DATE APPROVED	· .	PLEASE PRINT	,
DATE COMPLETED			
Owner	Contractor		
Lot #	Address		
Address			
	Bus. Phone		
Phone	Email Addres	SS	
Email Address			
	d		
When informing IMC of proj	ect completion please i	nclude a photograph(s) of the com	pleted project.
I have read and reviewed th	e HOA Guidelines befor	e submitting my application. Initia	al (required)
SUBMITTED BY (HOMEOWN	VER)		(SIGNATURE REQUIRED)
NOTE: A refun	dahle compliance der	posit of \$150 is required for this	nroiost

PLEASE SUBMIT THIS APPLICATION TO: IMC RESORT SERVICES, INC, FAX TO: 843-785-3901 ... MAIL TO: 181 Bluffton Rd. Ste. C-103 Bluffton SC 29910 EMAIL TO: <u>DAVE@IMCHHI.COM</u> ANY QUESTIONS.... PLEASE CALL 843-785-4775