

**Bella Beach Homeowners Association
ARC Application**

Date of Request: _____

Date to Begin Work: _____

Completion Date: _____

Homeowner: _____

Phone #: _____

Address: _____

Lot #: _____

Description of Improvement (Please attach a set of drawings of your intended plan):

Contractor (If applicable): _____

License #: _____

(If Contractor is required under Lincoln County ordinance, please attach Contact and Bond info).

Items Attached:

For Association Use Only:

Approved: _____

Disapproved: _____

Conditions of Approval or Reasons for Disapproval:

Date: _____

Authorized Member of Board of Directors