

Attachment 5
Landscaping Plan Application

Date submitted: _____

Applicant name: _____

Phone number: (H) _____ (C) _____ (W) _____

Site address: _____

___ Landscape plan attached

Certificate of Occupancy date: _____

Projected landscape start date: _____

Projected finish date: _____

The following is to be completed by a Kahler Glen Architectural Committee representative.

Date received: _____

Date reviewed: _____

Committee action:

___ Recommend approval to the Board

___ Recommend approval as noted: _____

___ Plan returned to applicant for revisions listed: _____

Committee representative signature: _____

Date: _____