ASSOCIATION OF LANDOWNERS OF PORT ROYAL PLANTATON, INC.
PLANS APPROVAL BOARD

CHANGE REQUEST FORM

DATE

OWNER

Name_____ Phone #_____

Address_____

_____

CONSTRUCTION ADDRESS_____
Lot #, Section and Street)

DESCRIPTION OF CHANGE (Attach revised or marked-up plans if necessary):

_____

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Note: See current Port Royal Plantation Plans Approval Board Guidelines and Procedures, paragraph 2.2.6.

_____ [ ]Owner [ ] Owner's Agent [ ]Builder

Applicant's Signature Date