

**NEWHAVEN**  
**Application for Change(s)/Addition(s)**

**Form E**

Lot:  
Street Address:

Date:

Builder:  
Address:

Architect:  
Address:

Phone:

Fax:

Phone:

Fax:

Owner:

Landscape Architect:  
Address:

Phone:

Fax:

Phone:

Fax:

Description of Change (attach Architect's sketch of proposed change):

Reason for Change:

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Submit to:           Newhaven Architectural Review Committee  
                          c/o Barnett Land Company  
                          P.O. Box 2628  
                          Peachtree City, GA 30269

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**FOR REVIEW COMMITTEE USE ONLY**

File Number: \_\_\_\_\_ Date Received: \_\_\_\_\_ Due Out: \_\_\_\_\_

Approved: \_\_\_\_\_ Approved with Conditions: \_\_\_\_\_  
(see attached)

Denied: \_\_\_\_\_