

**Cumberland Lakes Architectural & Environmental Compliance Committee
WORK REQUEST (Existing Homes Only)**

Date: _____

Name: _____

Mailing Address: _____ Phone Number: _____

**Description of work being performed
(Please include any sketches helpful for clarification)**

Requestor's Printed Name

Requestor's Signature

AECC USE ONLY

Date Received: _____

Date of AECC Approval: _____

AECC Chairperson

AECC Committee Member

AECC Committee Member

AECC Committee Member

AECC Committee Member

AECC Committee Member