



LE PARC

RESIDENTIAL
ESTATE

— *paarl* —

ALTERATIONS CHECKLIST

leparc.co.za



ERF NO:	
STREET ADDRESS:	

OWNER:	
EMAIL:	
DATE SUBMITTED:	
TEL:	

ARCHITECT:	
EMAIL:	
TEL:	

DESCRIPTION OF ALTERATION	

ARE ALL CHANGES TO THE ORIGINALLY APPROVED PLANS CLOUDED AND LABELED ON THE DRAWINGS	YES
ARE ALL CHANGES COLOURED ON THE PLANS AND SECTIONS	YES

I CONFIRM THAT THE PLAN SUBMITTED IS COMPLIANT WITH LE PARC'S CURRENT GUIDELINES

SIGNED	ARCHITECT:		DATE:	
	OWNER:		DATE:	

IF NO, PLEASE LIST AND MOTIVATE ANY DEVIATIONS WHICH MAY BE REQUIRED FOR APPROVAL OF THE PLAN

(PLEASE USE SEPARATE SHEET IF REQUIRED)

FOR COMMENT BY HOA:

PLAN APPROVED:	PLAN NOT APPROVED: