

APPLICATION FOR ARCHITECTURAL REVIEW

REQUIREMENTS: 1 ORIGINAL COPY OF THIS FORM WITH ANY ATTACHMENTS

PLEASE PRINT

NAME OF APPLICANT: LBR Solutions DATE: 03-17-22

ADDRESS: 1406 Kings Highway, Chester 10918

PHONE NUMBER: 845-234-6077 EMAIL: lauratotr98@optonline.net

LOCATION OF PROJECT: 1406 Kings Highway, Chester. Front entranceway

SECTION _____ BLOCK _____ LOT _____

PLEASE DESCRIBE IN DETAIL THE REASON FOR REVIEW (STATE DIMENSIONS, COLORS, MATERIALS, ETC.) ALSO, PLEASE ATTACH ANY PICTURES, DRAWINGS OR BROCHURES THAT APPLY TO YOUR CASE.

We are building a vestibule by front entrance.
The color will be the same as the building.

Plans are attached.

Construction to be performed by Figueroa
Roof + Renovation.

FEES: SIGNS \$100

ALL OTHER: \$250

PLEASE CALL 845-469-7000, EXT. 338 WITH ANY QUESTIONS.