



Lake Jane Estates Architectural Application

Revised 9-17-2020

Name: _____ Date: ____/____/____

Address: _____ Lot # _____

Email address: _____ Phone #: _____

Structure type and use: _____

Does structure meet Lake Jane Estates guidelines? Yes _____ No _____

Comments: _____

Approved: _____ Not approved: _____

Committee Signatures: _____ Date: ____/____/____

_____ Date: ____/____/____

_____ Date: ____/____/____

Member notified of decision? _____ Date: ____/____/____