Architectural Review Worksheet



Complete applicable information for your project

Address:	Property Owner Nam	e:	Date:	
Property Owner Email:	Pr	operty Owner Phone:		
Condominium Approval Letter: Y	N			
Submittal Type: Preliminary	Revision	Fin	al	
Detailed Scope of Work:				
Architect Firm:	Contact:	Pho	one:	
Email:				
Builder/Contractor:	License	e: Pho	one:	
Email: I	Project Manager:	Pho	one:	
	Property - Resider	nce		
A/C Sq. Ft: Ground level:	1 st floor:	2 nd	floor:	
FEMA 1 st habitable floor level:				
Highest Point of Roof:	Highest	Point of Chimney:		
ORCA maximum lot coverage calculation: _				
Set Back Information: 1 st floor front:				
2 nd floor front:	R side:	L side:	Rear:	
Existing & Proposed Elevations: Crown of F	Road	Center:		
Front L :Back L :	Front R :		Back R:	
	Pool - Spa			
Contractor:	Name:	me: License #		
Email:				
Detailed Scope of Work:				
	Docks - Davits - Lifts -	- Piers		
Contractor:	Project Manager:	License	e#	
Email:	Phone:			
	ORCA Boat Lift Notice Required: Y N			



Landscape

Architect Firm:	Contact:	Phone:		
Email:	Installing Conti	Installing Contractor/Project Manager:		
Email:	Phone:			
Detailed Scope of Work:				
ORCA Roadside Swale/s Length:	Ft. Width:	Ft. Depth:	Inches	
MC Side Swale/s Length:	Ft. Width:	Ft. Depth:	Inches	
MC Rear Swale/s Length:	Ft. Width:	Ft. Depth:	Inches	
	Exterior Mate	erials		
SUBMIT PHOTO (OF 10' X10' PAINT SAMPLE/S ON	EXTERIOR WALL FOR FINAL APPROVA	L	
Roof material:		Color:		
) Wall material / finish:		Color:		
Accent Trim material / finis	h:	Color:		
) Window – Door material:				
Shutter material / finish:				
Soffit / fascia material:				
Driveway Material/s:		Color:		
	er Drain Y N			
		Color:		
The above has been completed by obtained a copy of, have read and Signature: Print Name:	fully understand the ORCA Bu		s: 	
	ORCA STAFF O	NLY		
Submitted Date:				
Date Reviewed:		Class Deposit Due:		
Comments:				
Revisions Review Date:Comments:	Arch Review Da	te:		