



I hereby acknowledge that I have read and understand the Architectural Control Standards set forth by the Committee and in Section 14 of the Declaration of Covenants, Conditions and Restrictions of Waterstone .

Homeowner's Signature \_\_\_\_\_ Date \_\_\_\_\_

.....OFFICE USE ONLY.....

Architectural Review Action:

- ( ) Approved as submitted
- ( ) Approved with restrictions as follows: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- ( ) Deferred; please supply additional information: \_\_\_\_\_  
 \_\_\_\_\_
- ( ) Denied; ARB comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ARB Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return the completed form to:  
Waterstone HOA  
c/o Kirkpatrick Management Co., Inc.  
5702 Kirkpatrick Way  
Indianapolis, IN 46220  
Attn: Diane Arnett or email to:  
darnett@ekirkpatrick.com