

Date of Submission	
HOA Evaluator	

Stand No		Ext	
Owner Name & Surname		Owner E-Mail	
Architect Name		Architect Contact No	
Architect SACAP No		Architect E-Mail	

[illegible]

FAR:	NEW COVERAGE:	FF TO GF RATIO:
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SIGNATURE: ARCHITECT

DATE _____

[illegible]

APPROVAL STATUS	☐ Approved DATE 1:	☐ Not Approved	☐ Conditionally Approved, Yes
	☐ Approved DATE 2:	☐ Not Approved	☐ Conditionally Approved, Yes
	☐ Approved DATE 3:	☐ Not Approved	☐ Conditionally Approved, Yes
	☐ Approved DATE 4:	☐ Not Approved	☐ Conditionally Approved, Yes