

ARCHITECTURAL REVIEW APPLICATION

eMail APPLICATION TO: EMAIL: garden.village.arc@gmail.com

or mail to: CAMS by Stacia 1800 2nd Street, Suite 853, Sarasota, FL 34236 PHONE: 941-315-8044 FAX 941-870-8490

APPLICATIONS MUST BE RECEIVED IN COLOR BY EMAIL (Preferred) OR MAIL

LANAI EXTENSIONS, POOL INSTALLATIONS OR ANY OTHER PROJECTS INVOLVING DISRUPTION OF IRRIGATION LINES WILL REQUIRE A \$2000.00 REFUNDABLE DEPOSIT PAYABLE TO GARDEN VILLAGE COMMUNITY ASSOCIATION, INC.

TO BE COMPLETED BY HOMEOWNER

APPLICATION TYPE: FENCE POOL/SPA PATIO SCREENED ENCLOSURE EXTERIOR PAINTING
 LANDSCAPING LAWN REPLACEMENT SATELLITE OTHER _____

DESCRIPTION OF ARCHITECTURAL CHANGE:

NAME:

PROPERTY ADDRESS:

LOT NO:

MAILING ADDRESS:

PHONE:

EMAIL:

PLEASE INCLUDE THE FOLLOWING WITH THIS APPLICATION:

1. ATTACH A COPY OF THE PROPERTY SURVEY THAT SHOWS THE LOCATIONS OF THE PROPOSED CHANGE, ALTERATION, RENOVATION OR ADDITION.
2. ATTACH DRAWINGS OF YOUR PLAN(S) AND ANY CONTRACTOR'S PROPOSAL.
3. ATTACH COLOR PHOTOS OF PROJECT AND ALL COLOR SAMPLES AND DESCRIPTIONS.

NOTE: APPLICATIONS SUBMITTED WITHOUT A COPY OF THE SURVEY, DRAWING, COLOR SAMPLE OR PHOTO WILL BE CONSIDERED INCOMPLETE. ANY INCOMPLETE APPLICATION WILL BE RETURNED TO YOU AND SHALL BE CONSIDERED AUTOMATICALLY DENIED.

I HEREBY UNDERSTAND AND AGREE TO THE FOLLOWING CONDITIONS:

1. NO WORK WILL BEGIN UNTIL WRITTEN APPROVAL IS RECEIVED FROM THE ASSOCIATION. YOU HAVE 6 (SIX) MONTHS FROM THE APPROVAL DATE TO COMPLETE THE WORK. IF NOT, THEN YOU MUST REAPPLY FOR APPROVAL.
2. ALL WORK WILL BE DONE EXPEDITIOUSLY ONCE COMMENCED AND WILL BE COMPLETED IN A PROFESSIONAL MANNER BY A LICENSED CONTRACTOR OR MYSELF.
3. ALL WORK WILL BE PERFORMED TIMELY AND IN A MANNER THAT WILL MINIMIZE INTERFERENCE AND INCONVENIENCE TO OTHER RESIDENTS.
4. I ASSUME ALL LIABILITY AND WILL BE RESPONSIBLE FOR ANY AND ALL DAMAGES TO OTHER LOTS AND/OR COMMON AREA, WHICH MAY RESULT FROM PERFORMANCE OF THIS WORK.
5. I WILL BE RESPONSIBLE FOR THE CONDUCT OF ALL PERSONS, AGENTS, CONTRACTORS, SUBCONTRACTORS, AND EMPLOYEES WHO PROVIDE SERVICES IN CONNECTION WITH THIS WORK.
6. I AM RESPONSIBLE FOR COMPLYING WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL LAWS, CODES, REGULATIONS AND REQUIREMENTS IN CONNECTION WITH THIS WORK. I WILL OBTAIN ANY NECESSARY GOVERNMENTAL PERMITS AND APPROVAL REQUIRED FOR THE WORK.
7. UPON RECEIPT OF THIS FORM, MANAGEMENT WILL FORWARD THE APPLICATION TO THE ASSOCIATION. A DECISION BY THE ASSOCIATION MAY TAKE UP TO 30 OR MORE DAYS, DEPENDING ON THE ASSOCIATION DOCUMENTS. I WILL BE NOTIFIED IN WRITING WHEN THE APPLICATION IS APPROVED, DENIED OR PENDING.

ALL HOMEOWNERS ARE RESPONSIBLE FOR FOLLOWING THE RULES AND GUIDELINES OF THEIR ASSOCIATION WHEN MAKING ANY EXTERIOR MODIFICATIONS.

HOMEOWNER SIGNATURE: _____ DATE: _____

TO BE COMPLETED BY ARCHITECTURAL REVIEW BOARD

ARCHITECTURAL REVIEW BOARD DECISION: REQUEST APPROVED APPROVED W/ CONDITION REQUEST DENIED

ARB SIGNATURES

DATE

1.

2.

3.

COMMENTS:

For Office Only

Date App/Check Received: _____ Check #: _____ Amount: _____