

DATE RECEIVED: _____ DATE SENT TO ACC: _____

ARCHITECTURAL CHANGE REQUEST APPLICATION

An application must be submitted to the Architectural Control Committee (ACC) by a Homeowner with respect to any proposed improvement or material change in an existing improvement owned by the Homeowner.

COMMUNITY NAME: _____
PROPERTY OWNER: _____
PROPERTY ADDRESS: _____
TELEPHONE NUMBER (HOME): _____
E-MAIL ADDRESS: _____
SIGNATURE OF OWNER _____

Power & Duties of the ACC - No improvements shall be constructed on any portion of the home site, no exterior of a home shall be repainted, no landscaping, sign, or improvement erected, removed, planted, or maintained on any portion of the home site, nor shall any material addition to or any change, replacement, or alteration of the improvements as originally constructed (visible from the exterior of the home) be made until the plans and specifications showing the nature, kind, shape, height, materials, floor plans, color scheme, and the location of same shall have been submitted to and approved in writing by the ACC. The ACC shall have the right to refuse to approve any plans and specifications, which are not suitable or desirable in the ACC's sole discretion for aesthetic or any other reasons. **Permits:** The Homeowner is solely responsible to obtain all required building and other permits from all governmental authorities.

DESCRIPTION OF PROPOSED IMPROVEMENTS/ALTERATIONS:

- 1. _____

- 2. _____

APPROPRIATE PLANS/SKETCH, WITH LOCATION, MEASUREMENTS/DIMENSIONS ON A COPY OF YOUR PROPERTY SURVEY MUST BE ATTACHED WITH REQUEST.
(On this site plan drawing show dimensions, setbacks, landscaping, etc.)

FOR ACC USE ONLY (ACTION OF THE COMMITTEE)

- 1. DISPOSITION APPROVED _____ DENIED _____
COMMENTS/CONDITIONS: _____

- 2. DISPOSITION: APPROVED _____ DENIED _____
COMMENTS/CONDITIONS: _____

SIGNATURE OF ACC: _____ Date: _____
SIGNATURE OF ACC: _____ Date: _____

DATE LETTER SENT TO APPLICANT: _____ BY: _____

THIS APPROVAL IS GOOD FOR ONLY 6 MONTHS FROM DATE OF MEETING. YOU WILL NEED TO RESUBMIT FOR APPROVAL IF 6 MONTHS HAS LAPSED AND THE ALTERATIONS ARE NOT COMPLETED.

Return completed form to:
West Park Preserve
18636 Mentmore Blvd.
Land O' Lakes FL 34638
or FAX to (813) 909-4575