

**HOMEOWNERS ASSOCIATION INC.
ARCHITECTURAL REVIEW APPLICATION**

PLEASE COMPLETE AND RETURN THIS FORM TO THE ADDRESS BELOW.
WORK MAY NOT COMMENCE UNTIL THE COMMITTEE PROVIDES A WRITTEN APPROVAL.

MAIL TO: CANOE CREEK WOODS HOMEOWNERS ASSOCIATION INC.
C/O ASSOCIA-COMMUNITY MANAGEMENT PROFESSIONALS
4700 MILLENIA BLVD • SUITE 515 • ORLANDO, FLORIDA 32839
PHONE: 407-455-5950 FAX: 407-903-9234

PROPERTY OWNER: _____ DATE: _____

PROPERTY ADDRESS: _____

MAILING ADDRESS (IF DIFFERENT) _____

PHONE: _____ FAX: _____ EMAIL: _____

- ATTACH A SURVEY WITH THE LOCATION OF THE CHANGE MARKED ON IT.
- PLEASE ATTACH A DIAGRAM LOCATING EXTERIOR CONSTRUCTION PROJECTS
- ATTACH PLANS OR PHOTOS AS NEEDED TO DESCRIBE MODIFICATION
- ALL NECESSARY GOVERNMENTAL PERMITS REQUIRED ARE A CONDITION OF APPROVAL AND ARE THE OWNER'S RESPONSIBILITY TO OBTAIN
- ALL APPROVALS ARE SUBJECT TO INSTALLATION CONFORMING TO ASSOCIATION DOCUMENTS

DESCRIBE THE ADDITION, CHANGE OR INSTALLATION TO BE REVIEWED BY THE ARCHITECTURAL REVIEW BOARD:
PLEASE PROVIDE PAINT NUMBERS AND SAMPLES for exterior painting

OWNER SIGNATURE/DATE

FOR USE BY ARCHITECTURAL REVIEW BOARD

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DATE RECEIVED _____ DATE TO ARB _____ DATE TO HOMEOWNER _____

THE ARB'S DECISION ON THE PLANS SUBMITTED IS AS FOLLOWS, SUPPORTING DOCUMENTATION MAY BE ATTACHED TO THIS FORM:

[] APPROVED (MUST CONFORM TO ASSOCIATION COVENANTS & RESTRICTIONS)

[] PLANS INCOMPLETE, INFORMATION REQUESTED _____

[] APPROVED WITH THE FOLLOWING CONDITION _____

[] REJECTED. REASON _____

*PLEASE RESUBMIT PLANS TO THE ARB WITH FOURTEEN (14) DAYS OF RECEIPT OF THIS NOTICE.
THANK YOU FOR YOUR COOPERATION.*

BY: _____ DATE: _____

NONA PRESERVE HOMEOWNERS ASSOCIATION INC.
ARCHITECTURAL REVIEW BOARD

BY: _____ DATE: _____

NONA PRESERVE HOMEOWNERS ASSOCIATION INC.
ARCHITECTURAL REVIEW BOARD