

EAGLERIDGE HOMEOWNERS ASSOCIATION, INC.

ARCHITECTURAL REVIEW APPLICATION

EAGLERIDGE IS A DEED RESTRICTED PROPERTY. This application is to be completed by the homeowner and submitted to the Architectural Review Committee (ARB) for approval PRIOR to commencement of any work to the exterior of your home or property. Please print legibly and provide all information required. Mail completed application to:



Premier Association Management of Central FL
375 E Hwy 50, Clermont FL 34711
Questions call: 352) 432-3312 or email, PAMcl@PremierMgmtCFL.com

Please allow up to thirty (30) days upon receipt for a decision from the ARB. If all required information is not included with this form at the time of submission, the time period does not apply for approval/disapproval.

Date Submitted: Anticipated Start Date: Completion Date:

I (we) (property owner(s)) understand and agree that NO construction, change to home or property will commence in any manner or respect, until I receive written approval by the Architectural Review Committee (ARC), which may take up to 30 working days.

Property Address: Clermont, FL 34714 Email

Mailing Address:

Home Phone # Work Phone # Cell Phone #

Please give a complete description of requested changes including dimensions, location, type, shape, nature, etc. Include lot survey, site plans, diagrams, color chips, materials description, sample products, photographs. All requests must be accompanied by a site plan and contractor's plans (if applicable). Also be sure to include a copy of your Lake County building permit if the improvements require a permit

Home exterior changes may include but is not limited to the following. Please mark all that apply.

- Checkboxes for: Addition, Driveway, Door, Fence, Landscape, Lighting, Paint: House, Trim, Patio/Deck, Play Structure, Pool/Spa, Roof/Gutters, Satellite Dish, Screening, Shutters/Awnings, Solar Panels, Other:

SPECIFICATIONS: (attach copies of plans, estimates or pictures)

Location:

Dimensions:

Material(s):

Color(s):

Note: Requests and alterations must conform to all local Zoning and Building Regulations of Lake County.

IF APPROVED, ALL WORK MUST BE COMPLETED WITHIN THE STATED ANTICIPATED COMPLETION DATE LISTED ABOVE OR WITHIN 90 DAYS FROM DATE APPROVED, WHICHEVER COMES FIRST. WORK NOT COMPLETED WITHIN STATED TIME FRAME MUST BE RESUBMITTED FOR AN EXTENSION Failure of the ARB to respond within thirty days deems this project disapproved by the ARB.

Property Owner Signature: X Date:

----The following area is for use by the Architectural Review Committee/Premier Association Management. ----

Approved Disapproved Date:

Board Members Signature:

ARB Comments: