

REQUEST FOR ARCHITECTURAL APPROVAL

This is a request form to be completed by the homeowner and submitted to the (ACC) Architectural Control Committee for approval **BEFORE** any work commences. Please complete in it's entirety and mail to *Sentry Management, Inc. 2605 Enterprise Rd. E #200, Clearwater, FL 33759; 727-799-8982 or Fax: 727-799-8984 or email to calexopoulos@sentrymgmt.com*

THIS SECTION TO BE COMPLETED BY THE HOMEOWNER

ASSOCIATION NAME: Old Harbor Place -310200 DATE: _____
Safety Harbor, FL 34695

NAME: _____ LOT #: _____

ADDRESS: _____

PHONE (HOME) _____ (WORK) _____

DESCRIBE THE EXTERIOR CHANGE/ADDITION/INSTALLATION: (i.e. pool, screen enclosure, patio, landscaping, sidewalk/driveway pavers, paint, etc.)

LOCATION: (ATTACH A COPY OF THE PLOT PLAN SHOWING THE LOCATION OF THE ADDITION OR INSTALLATION or PAINT SAMPLES* – MUST BE PROVIDED) GIVE DESCRIPTION.

SPECIFICATIONS: (ATTACH A COPY OF THE PLANS OR SUITABLE DRAWING OR PICTURE - MUST BE PROVIDED)

DIMENSIONS: _____

MATERIAL (S): _____

COLOR (S) Include manufacturer and color numbers (*FOR EXTERIOR PAINT-A PAINT COLOR SAMPLE MUST BE PAINTED ON YOUR HOUSE (minimum of 1 ft. X 1 Ft.) & BE VISIBLE FROM THE STREET):

ESTIMATED TIME OF COMPLETION: _____

NOTE: ALL REQUESTS MUST CONFORM TO THE LOCAL ZONING AND BUILDING REGULATIONS AND OWNERS ARE RESPONSIBLE FOR OBTAINING THE NECESSARY PERMITS IF YOUR REQUEST IS APPROVED.

THIS SECTION TO BE COMPLETED BY THE MANAGEMENT CO.

REQUEST: DATE APPROVED _____ DATE DENIED _____

AUTHORIZED SIGNATURE: _____

(ACC) SIGNATURE: _____

(ACC) COMMENTS: _____

THIS APPROVAL IS GOOD FOR NINETY DAYS (90). IF YOUR PROJECT WILL NOT BE DONE WITHIN 90 DAYS, PLEASE SUBMIT THE REASON WHY THE PROJECT CANNOT BE DONE WITHIN 90 DAYS FOR BOARD CONSIDERATION.

DATE RECEIVED: _____ DATE INSPECTED: _____ DATE OF FINAL _____