

**PRESERVE AT ASTOR FARMS HOMEOWNER'S ASSOCIATION**

**Architectural Review Committee (ARC) Application**

Owner Name \_\_\_\_\_  
Address \_\_\_\_\_  
Unit/Lot Number \_\_\_\_\_  
Home \_\_\_\_\_ Work \_\_\_\_\_

In accordance with the Association's governing documents, I/we hereby apply for consent to make the following modification(s) or addition(s):

**STEP 1**

**DESCRIPTION OF MODIFICATION OR ADDITION:** The description must include complete information necessary to thoroughly understand anticipated modifications or additions such as the height, width, size, shape, color, etc. Please submit photographs, sketches, brochures, and a copy of your property survey with the location of the improvement(s) indicated on it.

Your application cannot be processed without this crucial information!

- Fence
- Swimming Pool
- Lawn Ornament
- Patio
- Screen Enclosure
- Exterior Color
- Landscaping
- Lawn Replacement
- Satellite Dish
- Other \_\_\_\_\_

Description:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**STEP 2**

Acknowledgement by all surrounding property owners is needed. Their signatures (below) indicate awareness of intent and do not constitute approval or disapproval. (Use additional sheets if necessary).

1. Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

2. Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

3. Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

4. Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

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Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

5. Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

6. Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

7. Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

8. Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

**STEP 3 Acknowledgement of Adjacent Property Owner(s)**

This section should be completed if your project will require you to move materials or equipment over the Association's common elements, and/or adjacent property's owner's Lot.

If this section does not apply to your project, please initial here.

Owner's Initials \_\_\_\_\_

If your project will require you to move materials or equipment over the Association's common elements you must indicate on the copy of your Property Description any area(s) if common elements that will be affected. A signature must be obtained from the Association's Managing Agent.

Owner's Initials \_\_\_\_\_

I/we hereby acknowledge that in order to complete the above-described alteration, the above-described owner must cross my/our lot(s) with materials and/or equipment. The above-described owner shall bear full responsibility for repair of any damage caused by said materials and/or equipment. In no instance shall the Association or the Declarant be held responsible for said damage.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

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Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Lot Number \_\_\_\_\_

Managing Agent's Signature (if Applicable):

\_\_\_\_\_

Print Name/Title

\_\_\_\_\_

**NOTE:**

Currently approved community house paint colors should be requested from the ARC.

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### STEP 4

Owner's acknowledgement: I/we understand that:

1. Material herein contained shall represent alterations that comply with all applicable zoning and building codes. Further, nothing herein contained shall be construed as a waiver or modification of such ordinances. I/we are responsible for obtaining necessary building permits prior to commencement of construction.
2. No work shall commence until written approval of the Board of Directors has been received by me/us. Any alteration completed before approval of this application is not permitted and if alterations are made, I/we understand that we may be required to return the property to its former condition at my/our expense; and that I/we may be required to pay all legal expenses incurred.
3. All approved alterations must be completed within 3 months of final approval. All approvals shall be voided upon the expirations of three months from issuance. A full resubmission must be made for any voided approvals.
4. Approval is contingent upon all work being completed in a diligent and workmanlike manner. Members of the Board of Directors and their agent(s) reserve the right to make routine inspections.
5. I/we take full responsibility for any damages to the Association's common elements, the property of the Declarant, or any other privately or publicly owned property as a result of my/our actions or the actions of our contractors or agents. In particular and with limitation, I/we acknowledge that I/we will be responsible for any curb, sidewalk, driveway, apron, landscaping and/or drainage damage that may be caused by the installation of the requested improvement.
6. This request is subject to restrictions by the Association's governing documents and a review process as established by the Board of Directors. Any variation from the original application must be resubmitted. The Board will return a copy of this request to me/us after review.
7. The Board or Committee shall take up to 30 days to review and reply to the application. House of Management Enterprises, Inc. is solely responsible for processing the applications and will return by mail the application confirming the approval or disapproval including any and all stipulations or denial reasons.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

Office Use Only	
Date Received by Management	
Complete (Yes/No)	
Additional Items Required	
Comments	

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**STEP 5: To Be Completed by the Board of Directors/Architectural Review Committee**

Date Received by Board of Directors \_\_\_\_\_

- Final approval as requested
- Final approval subject to the following conditions/modifications. (See Comments)
- Disapproved for the following reasons. (See Comments)

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature -- Board of Directors Chairperson

\_\_\_\_\_  
Date

Office Use Only	
Date Received from Board of Directors	
Date Final Approval/Disapproval Sent to Homeowner	
Date Received by Management	

**PLEASE SUBMIT COMPLETED FORMS AND DOCUMENTATION TO:**

**Preserve at Astor Farms  
5756 S. Semoran Blvd.  
Orlando, FL 32822**

**Phone: 407-852-5300  
Fax: 407-852-5301**