

GENERAL REVIEW ARC FORM ONLY

If the Resident is not Home Owner, form must be completed by Home Owner

Instructions

- 1) ARCHITECTURAL CONTROL section 5.1 – No building, wall or other structure shall be commenced, erected or maintained upon the Properties, nor shall any exterior addition to or change or alteration therein be made until the plans and specifications showing the nature, kind, shape, height, materials, and location of the same and a landscape plan shall have been submitted to and approved in writing as to harmony of external design and location in relation to the surrounding structures and topography by the Architectural Review Board (ARB) composed as set forth below.**
- 2) Complete all items on form and sign form.**
- 3) ARC form must be approved prior to commencement of any work.**
- 4) Please allow 30 days for form approval.**
- 5) Inspection by ARB will be in 30 days from work commencement date.**
- 6) Mail or Hand Deliver form to:**

**Woodbury Park HOA
C/O Bono & Associates
640 E. SR 434.
Suite 3000
Longwood, Florida 32750**

**Phone: 407-233-3560
Ext 111**

Email: Laura@bonomgmt.com

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Date: ____ / ____ / ____

Residents Name: _____

Owners Name: _____

Lot/Account Number: _____

Owners Signature: _____

Property Address

Address: _____

City, State, Zip: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Email Address: _____

Owners Address (if different from Property Address)

Address: _____

City, State, Zip: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Email Address: _____

Work Commencement Dates

Start: ____ / ____ / ____ Completion: ____ / ____ / ____

1. List all project materials to be used. For each material include the following information:

Material Type

Color

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All information below this point is to be completed by
ARB only and is for owner information.

Circle YES on only 1 of the 3 bullet points

- 1. Request not approved? **YES**
OR
- 2. Request approved without conditions? **YES**
OR
- 3. Request approved with conditions? **YES**

If conditions, what are they? _____

ARB Signature: _____

Date: ____ / ____ / ____

Number of members approving: _____

Number of members not approving: _____