



c/o Dorrill Management Group
5672 Strand Ct, Suite 1
Naples, FL 34110

Architectural Review Application

Date: _____

I, _____, hereby request approval by the Architectural Review Board the modification shown below to the single-family home located at _____.

Modification:

Upon approval of my request for this modification, I/we will assume all liability for any damages incurred as a result of this modification as well as any additional maintenance costs that may be required by any governmental agencies for this modification.

THE FOLLOWING MUST BE PROVIDED WITH EACH REQUEST:

1. A sketch including the dimensions of the proposed modifications.
2. The location of the modification on the property.
3. A copy of the survey of the property
4. Color samples if applicable
5. If a contractor is hired, the following must be included
 - a. Copy of business license
 - b. Certificate of Insurance, with certificate holder made out as follows:

Eden at The Strand HOA
c/o Dorrill Management Group
5672 Strand Ct, Suite 1
Naples, FL 34110

I/We hereby make application to the Architectural Review Board for the above-described v item to be approved, in writing, by the Architectural Review Board. I/We understand that approval of our request must be granted before I/We can have the job started. I/We also acknowledge that we could be forced to have the item removed if it is installed without approval. I/We also acknowledge that if this request is granted "AS PRESENTED" to the ARB, the work must be completed as presented. Any changes are not approved and will not be accepted without the approval of the Board.

Owner Signature: _____

YOU WILL BE NOTIFIED WHEN YOUR REQUEST HAS BEEN REVIEWED



Internal Use Only:

ARB Meeting Date: _____

The above request for modification to the home located at _____ has been:

APPROVED

NOT APPROVED

APPROVED WITH THE FOLLOWING MODIFICATIONS:

PLEASE NOTE THAT A FINAL INSPECTION WILL BE DONE TO ENSURE THAT ALL WORK WAS COMPLETED IN ACCORDANCE WITH THE PLANS AS SUBMITTED.

INCOMPLETE APPLICATIONS WILL BE RETURNED AND THE 30-DAY PERIOD FOR APPROVAL WILL RESTART UPON RECEIPT OF THE RESUBMITTED COMPLETE APPLICATION.

COMMENCEMENT OF APPROVED APPLICATIONS MUST BEGIN WITHIN 12 MONTHS FROM THE DATE OF APPROVAL. FAILURE TO COMMENCE THE PROJECT BY THE ANNIVERSARY DATE WILL REQUIRE THAT THE APPLICATION BE RESUBMITTED FOR APPROVAL.