

**REQUEST FOR ARCHITECTURAL APPROVAL**

Rev: 12/1/2017

This is a request form to be completed by the homeowner and submitted to the (ARC) Architectural Review Committee for approval **BEFORE** any work commences. Please complete in its entirety and mail or email to: Reserve at Crossing Creek HOA, c/o Sunvast Management, 321 Interstate Blvd. Sarasota, FL 34240

FAX: 941-378-0260 or Email: info@sunvast.net

**THIS SECTION TO BE COMPLETED BY THE HOMEOWNER**

Reserve at Crossing Creek Village, Phase 2, HOA

NAME: \_\_\_\_\_ LOT #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE (HOME): \_\_\_\_\_ PHONE (CELL): \_\_\_\_\_

EMAIL: \_\_\_\_\_

DESCRIBE THE CHANGE/ADDITION/INSTALLATION: i.e. fence, screen enclosure, patio, satellite dish, landscaping, sidewalk/driveway pavers, lighting, etc. (Painting must include paint color chip, awning must include material swatch).

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

LOCATION: Attach a copy of lot plot plan/survey showing details, distance and location of project as related to house.

SPECIFICATIONS: A copy of the plans, drawing, or pictures as relevant.

DIMENSIONS: \_\_\_\_\_

MATERIAL (S): \_\_\_\_\_ COLOR (S): \_\_\_\_\_

ESTIMATED COMPLETION DATE: \_\_\_\_\_

**Note: I agree to abide by the Covenants and Restrictions & Architectural Review Guidelines of the association. Owners are responsible for the work/action of persons under their employ, direction or authority. Please supervise the project to ensure that damage to common areas does not occur or is corrected. 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. Residential street trees, primarily Live Oak trees in our community, also require a Manatee County permit to remove and replace. Project has to be completed 180 days from the approval date. NOTIFY SUNVAST UPON COMPLETION.**

OWNER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**PLEASE DO NOT WRITE BELOW THIS LINE**

DATE RECEIVED BY SUNVAST: \_\_\_\_\_ SENT TO ARC: \_\_\_\_\_

REQUEST: DATE APPROVED/DENIED \_\_\_\_\_ SENT TO H/O: \_\_\_\_\_

(ARC) SIGNATURE: \_\_\_\_\_ (ARC) NAME: \_\_\_\_\_

(ARC) Comments or Conditions: \_\_\_\_\_

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

PROJECT COMPLETION DATE PROVIDED BY HOMEOWNER TO SUNVAST: \_\_\_\_\_

COMPLETED PROJECT VERIFIED BY ARC: \_\_\_\_\_ DEVIATIONS SENT TO BOD: \_\_\_\_\_