

REQUEST FOR ARCHITECTURAL APPROVAL

This is a request form to be completed by the homeowner and submitted to the Architectural Review Committee (ARC) for review BEFORE any work commences.

Please complete in its entirety and mail to:

Lakes Estates Homeowners Association, Inc.
c/o Argus Property Management
2477 Stickney Point Road
Sarasota, FL 3423713
Fax: 941-927-6454 phone: 941-927-6464

**THIS SECTION TO BE COMPLETED BY THE HOMEOWNER
(plot plan must be attached to this request)**

Date: _____

Name: _____ Lot #: _____

Address: _____

City _____ ZIP _____

Phone (home) _____ (work) _____

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

Location: Attach a copy of the plot plan/survey showing the location of the addition or installation (must be provided). Describe the work being done. _____

Specifications: Attach a copy of the plans, drawing or photograph (must be provided).

Dimensions _____

Materials: _____

Color(s) (sample or color chip must be provided). _____

Estimated date of completion (not to exceed 90 days from date of approval): _____

NOTE: Per the Governing documents: Owners are responsible for the work/action of persons under their employ, direction or authority. Please supervise the work to ensure that damage to common areas either does not occur or is corrected if it does occur. All requests must conform to the local zoning and building regulations and owners are responsible for obtaining the necessary permit if request is approved.

----- Please do not write below this line-----

REQUEST: Date approved _____ Date denied _____

(ARC) SIGNATURE: _____

(ARC) Comments or Conditions: _____

Date received by Argus: _____ sent to ARC: _____ Sent to H/O: _____