



PHILLIPS OAKS

ARCHITECTURAL REVIEW APPLICATION

*This form is to be completed by the homeowner and submitted to
the Architectural Review Board
for approval prior to the commencement of any work.*

This application form contains the following sections:
(including this cover 3 pages total)

Section A
Applicant Information

Section B
Complete The Following if Applicable

Section C
Purpose of Application

Section D
Notice

Section E
Delivery & Receipt Dates

Section F
Architect Review Board / Official Use Only

ARCHITECTURAL REVIEW APPLICATION

MAIL THIS ARB APPLICATION TO:

Phillips Oaks Homeowners Association, Inc.

Architect Review Board

4901 Vineland Rd. (Suite 455)

Orlando, FL 32811

CMPAdmn@associa.us

This form is to be completed by the homeowner and submitted to the Architectural Review Board for approval prior to the commencement of any work. Allow thirty (30) days upon receipt for a decision from the ARB Committee. If you will be using heavy equipment LE. Dump Truck, Bob Cat, Fork Lift, Front End Loader, etc., it is the responsibility of the home owner to take precautions to ensure no damage is done to the roadway, sidewalks, and any other common areas, or the homeowner will be held responsible for restoring such areas to their original state.

www.MyPOHOA.com

Section A) APPLICANT INFORMATION:

APPLICATION DATE: _____	PROPERTY DESCRIPTION:
Name: _____	Street Address: _____
Mailing Address: <i>(if different from property address)</i> _____	_____
_____	Lot Number: _____
_____	Homeowners Name: _____
Signature: _____	Property Address: _____
_____	Email: _____
_____	Contact Phone: _____

This form will either be USPS mailed back to the property owner, or eMailed. The following items need to be submitted in duplicate along with this form; 1) Plot Plan showing location of modification, 2) Drawing and/or Color Samples. Once the ARB Committee approves this application, work must be completed within 90 days, or a new application must be submitted. Always refer to the Declaration of Conditions, Covenants, Easements and Restrictions for Phillips Oaks Homeowners Association, Inc. If you have lost these documents, please visit www.MyPOHOA.com for your free downloadable documents.

Section B) COMPLETE THE FOLLOWING IF APPLICABLE

Contractor:	Architect:
Business Phone:	Business Phone:

Section C) PURPOSE OF APPLICATION: CHECK APPROPRIATE BOXES

- EXTERIOR COLOR SELECTIONS:** Attach color chips, Denote body, trim & roof colors.
- POOL:** Detail color of any screen enclosure, and detail of how pool equipment will be screened from view.
- FENCE PLAN:** Detail style, material, size, and color if the fence is to be painted.
- LANDSCAPE PLAN:** Show (attached to this form) design concept.
- CONSTRUCTION:** Such as a screen room, addition. Colors and materials must be detailed.

OTHER: _____

Section D) NOTICE

These plans have been reviewed for the limited purpose of determining the aesthetic compatibility of the design plans of the community. These plans are reviewed on that limited basis. No review has been made with respect to the functionality, safety, compliance with governmental regulations or otherwise, and no reliance on this approval should be made by any party with respect to any such matters.

The undersigned expressly disclaims liability of any kind with respect to these plans, the review hereof, or any structures built pursuant hereto, including but not limited to liability for negligence, breach of express, or implied warranty.

SECTION E) DELIVERY & RECEIPT DATES

Date eMail Received by ARB Committee:	Date Mailed by US Postal Service:
Date Hand Delivered to ARB Committee:	Date of Certified Mail: Certified Mail Number:

Section F) ARCHITECT REVIEW BOARD / OFFICIAL USE ONLY

APPROVED BY: _____

Signature

Date: _____

DISAPPROVED BY: _____

Signature

Date: _____