

The Trails HOA Architectural Review Committee (ARC) Form

Homeowners Name: _____

House Address: _____

Homeowners Address: _____

Daytime Phone: _____ Evening Phone: _____

Type of Improvement: _____

Description of Improvement: _____

Note: If colors are being changed, please provide color samples.

Date received by the ARC: _____ Reviewed by: _____

The ARC shall not be responsible for defects in the plans, specifications and/or the improvements. Nor shall they be responsible for obtaining the necessary permits required by the City of Altamonte Springs. The ARC's review of plans is limited solely to compliance with Association Documents.

If approved the Homeowner is responsible for obtaining any and all permits required by the City of Altamonte Springs. The Homeowner will provide the ARC with a copy of said permit(s).

The ARC together with the Declaration of Covenants & Restrictions has been developed to protect land values, preserve the natural beauty & insure the continuity of the lifestyle you chose when you purchased your home in The Trails at Country Creek. Without ARC it would be impossible to maintain the quality of life that we anticipate at Country Creek. It exists merely to protect you from mistakes of others that once in place, are costly to change.

APPROVED: () APPROVED with Changes: () DENIED: ()

Reason: _____

This approval is contingent on both the ARC chairperson and the Homeowners signature of acceptance. Your project must be completed within 6 months or you must re-apply.

Homeowner: _____ Date: _____

ARC Chairperson: _____ Date: _____