



Hanover Lakes Homeowners Association, Inc.
1631 E. Vine Street, Suite 300, Kissimmee, FL 34744
407.705.2190 Fax: 407.604.4304

Email Completed Application to: arb@artemislifestyles.com

ARCHITECTURAL CHANGE REQUEST

Please complete all pages enclosed
Please submit one application per each project

Lot No: _____ Date: _____
Property Owner: _____ Property Address: _____
Telephone Number: _____ Email Address: _____

INFORMATION ABOUT THE ARCHITECTURAL CHANGE YOU ARE SEEKING

- ✓ **Mark One:**
- | | |
|---|--|
| <input type="radio"/> Landscape Change | <input type="radio"/> Hurricane Shutters |
| <input type="radio"/> Fence Installation | <input type="radio"/> Screen/Patio Enclosure |
| <input type="radio"/> Color Change/House | <input type="radio"/> Patio Installation |
| <input type="radio"/> Driveway (Pavers, paint or stamped) | <input type="radio"/> Solar Panels |
| <input type="radio"/> Electrical/Lighting | <input type="radio"/> OTHER _____ |
| <input type="radio"/> Satellite Dish | <input type="radio"/> (Specify) _____ |
| <input type="radio"/> Roof Replacement | _____ |

For Paint Applications (be sure to include code and color name of approved color by your association):

Body/Garage Color Requested _____ Do you have shutters?
Trim Color Requested _____ Yes ☐ No ☐
Front Door Color Requested _____ If yes, color. _____

Please describe the type of change you are seeking approval for. Please specify any materials or any other information:



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ATTACH THE FOLLOWING TO YOUR REQUEST:

- Copy of your property survey, marking the area where the work will be performed on your home/lot including dimensions.
- Paint: Include paint color samples with the paint name and code
- Contractors' License & Certification of Insurance
- Copy of Contractor Plans

PLEASE READ AND SIGN THE FOLLOWING ACKNOWLEDGEMENT:

- ONLY the owner of the property may sign and submit the application for alteration or change.
- Submittal of application DOES NOT guarantee approval and any approval must be received, in writing, prior to making the alteration or change sought in this application.
- Architectural Change approval is based upon the aesthetics of the proposed change and does not certify the construction worthiness or structural integrity of the change proposed.
- Applicants are SOLELY responsible for calling the appropriate utilities BEFORE digging, to have all underground services marked. Applicants are SOLELY responsible for any damage or costs associated with restoring service. Applicants are SOLELY responsible for damaged irrigation.
- Applicants are Solely responsible for following all local codes, obtaining proper permits and adhering to set-back requirements when making the change.
- Applicants MAY NOT deviate in any manner from the plan, if approved. Any change will require PRIOR WRITTEN approval.

* If all necessary items are submitted, the application will be reviewed by the appropriate committee and decision timelines are contingent on the guidelines of your Association.

Signature of Property Owner: _____ Date: _____

ASSOCIATION USE ONLY

Date Received: _____ Control Number: _____

DATE SENT TO ARB _____ DISPOSITION: APPROVED ☐ DENIED ☐

CONDITIONS IMPOSED:

Signature(s) of ARB _____ Date _____

DISPOSITION LETTER SENT TO APPLICANT _____ by _____