

Riverbend Property Owners Association, Inc.

P.O. Box 730113 · Ormond Beach, FL 32173

Email: RiverbendPOA32174@gmail.com

Architectural Review Application

Owner Name: _____ Date: _____

Riverbend Property Address: _____

Contact Telephone: _____ Email: _____

Describe project, type of materials and colors (attached paint samples) to be used, if applicable. For other types of work (such as fences or structures, driveways, walkways) submit a survey and a drawing showing the dimensions of additions and modifications.

Name of contractor performing work: _____

Important notice: Prior to starting your project, you must first obtain Riverbend Board of Directors approval and obtain any and all necessary permits required by the County of Volusia.

This space reserved for Architectural Review

Project: _____

On this ____ day of _____ 20__ the Board of Directors met for review of the above application.

Approved: _____ **Subject to the following conditions:** Homeowner must adhere to all applicable County codes and permit requirements.

Denied: _____ Remarks: _____

Signed: _____ Date: _____