

**Haile Village Center Owners Association, Inc.
Architectural Review Board (ARB) Request Form**

Owners Name(s): _____
Lot/Unit #: _____
Address: _____
Email Address: _____ Phone #: _____

I certify that I am the Owner or the Owner's agent and have full authority to make this request from all Owners of the property. I understand that if approved to perform the work, I shall assume all liability for any damage incurred because of this work as well as any additional maintenance costs. I also agree to obtain any permits that may be required by all governmental agencies for this work, and I agree to fully indemnify the Association for any liability claims arising or resulting from the performance of this work. It is my duty to ensure that any persons or companies I employ to perform the work are properly licensed and insured.

The date of "receipt" will be the date that all required documentation is received.

Summary of Work:

Signature: _____ Date: _____

The following documents must be included with the request as applicable:

1. Completed copy of this request form. **Include a photo of the front of your property for the ARB, please.**
2. Copy of a sketch, including all dimensions, of the work or a copy of the proposed construction plan, plus a list of all materials (photographs of the existing site are helpful).
3. Copy of the property survey, showing the location of the modifications in relation to the property.
4. A digital (or hyperlink) set of color samples (if applicable).

NOTE: NEW CONSTRUCTION requires blueprint plans for review, all color selection samples, materials list, and completed copy of this request form, with all information required.

Submit this form and all supporting documents to the ARB in any of the following ways:

Via Email to: Haile Village Center <info@hailemanagement.com>
Via U.S. Mail / Hand Delivery to: Haile Management c/o Bobbie Jo Blackwell, CAM
5230 SW 91st Drive, Gainesville, FL 32608
(352) 561-3327

All work is required to be started and completed within a year of the approval date. Those that have not been started by the expiration of the approval date must be resubmitted for a new approval.

Fee Simple Owner(s) Signature(s): _____ Date: _____

Fee Simple Owner(s) Signature(s): _____ Date: _____

*****Below to be filled out by ARB Chairperson or Agent*****

The above request has been:

- Approved
- Provisionally Approved with attached changes (changes must be addressed prior to work)
- Not Approved

ARB Chairperson or Agent Signature: _____ Date: _____