

ARCHITECTURAL REVIEW APPLICATION

Homeowner's Association of Plummer's Cove, Inc.

7235 Bentley Rd, Suite 400

Phone: 904-220-8009 Email: help@epmhoa.com

Owner's Name: _____

Property Address: _____

Date Submitted: _____ Phone _____ Cell _____ Fax _____

Describe Alteration and/ or Addition:

Please submit the following with the application:

1. Drawings, pictures etc.
2. Complete description, including plans.
3. Type of materials and sample colors.
4. Contractor/Vendor Information.
5. Required permits.

This form is for architectural review only it does not override any Federal, State or Local government requirements. The property owner is responsible for any noncompliance. All approved work must start within **90 days** from the date of approval.

Do not start work without written approval (form returned)

Please do not write below this line

Review Date: _____ Review by: _____

Approved: _____ Disapproved _____ Reason: _____
