ARCHITECTURAL REVIEW FORM

Please Return Completed Form To: Heritage Cove Community, Clubhouse 14041 Brant Point Circle, Fort Myers, FL 33919 Phone: (239) 415-9500 Fax: (239) 415-9502 DATE:_____ Email: Office@heritagecove55.com NEIGHBORHOOD ASSOC: NAME OF OWNER(S): PROPERTY ADDRESS: PHONE(S). EMAIL: Request: Include the following: 1 1.) Name of Company performing work: Phone: 2.) Copy of Site Plan **to include** drawings, photos, specifications and attachments 3.) Business License & Certificates of Insurance COMMERCIAL LIABILITY/ WORKER'S COMP (OR WAIVER) [1 4.) Permits - provided by the Vendor IM/e hereby make application to the Architectural Review Committee (ARC) for the above described project for consideration and approval. IM/e understand that approval of our request must be granted before work can begin. Signature of Owner Signature of Owner NOTE TO OWNER: ARC Forms must be reviewed by a Board Member of your Neighborhood Association prior to submission to the ARC. It is the responsibility of the owner to submit the form & documentation to the ARC in a timely fashion. (FOR NEIGHBORHOOD ASSOCIATION BOARD USE ONLY) Approved/Reviewed Date: _____ Denied Date: Response: Signature of Neighborhood Association Board Member Print Name (FOR ARC USE ONLY) Approved Date:_____ Denied Date: Response:

Print Name

Signature of ARC Chairperson