Cypress Ridge Homeowner's Association, Inc.

ARCHITECTURAL REVIEW APPLICATION

PLEASE COMPLETE AND RETURN THIS FORM TO THE ADDRESS BELOW.
WORK CANNOT COMMENCE UNTIL THE COMMITTEE PROVIDES A WRITTEN APPROVAL.
APPLICATIONS MAY TAKE UP TO 30 DAYS FOR PROCESSING AND ARE SUBJECT TO A FINAL INSPECTION.

SUBMIT YOUR APPLICATION TO: INFO@ODINFLORIDA.COM

OR MAIL TO: **Cypress Ridge HOA** C/O ODIN PROPERTY MANAGEMENT LLC.
8 W Darlington Ave., Kissimmee, FL 34741 PHONE 321-430-0087

PROPERTY OWNER: ..... DATE: .....

PROPERTY ADDRESS: .....

MAILING ADDRESS (IF DIFFERENT) _____

PHONE: _____ FAX: _____ EMAIL: _____

DESCRIBE THE ADDITION, CHANGE OR INSTALLATION TO BE REVIEWED BY THE ARCHITECTURAL REVIEW BOARD:

[ ] LANDSCAPING [ ] FENCE _____
(Please include detail and photo)

[ ] PAINT COLOR SCHEME NUMBER _____ (substitution of color scheme is prohibited)
[ ] Building 1 [ ] Building 2 [ ] Building 3 [ ] Building 4 [ ] Building 5 [ ] Building 6

[ ] OTHER _____

PLEASE PROVIDE PROJECT DETAILS.....

_____

_____ X _____
OWNER SIGNATURE/DATE

- **PLEASE ATTACH A PROPERTY SURVEY COPY LOCATING EXTERIOR CONSTRUCTION PROJECTS**
- **ALL NECESSARY CITY PERMITS REQUIRED ARE A CONDITION OF APPROVAL AND ARE THE OWNER'S RESPONSIBILITY TO OBTAIN THEM**
- **ALL APPROVALS ARE SUBJECT TO INSTALLATION CONFORMING TO ASSOCIATION DOCUMENTS AND CITY ORDINANCE**

FOR USE BY ARCHITECTURAL REVIEW BOARD ONLY

DATE RECEIVED ____ DATE TO ARB _____ DATE TO HOMEOWNER ____

THE ARB's DECISION ON THE PLANS SUBMITTED IS AS FOLLOWS, SUPPORTING DOCUMENTATION MAY BE ATTACHED TO THIS FORM:
[ ] APPROVED *(MUST CONFORM TO ASSOC/ATION COVENANTS & RESTRICTIONS)*
[ ] PLANS INCOMPLETE, INFORMATION REQUESTED _
[ ] APPROVED WITH THE FOLLOWING CONDITION __
[ ] REJECTED. REASON _____
PLEASE RESUBMIT PLANS TO THE ARB WITHIN FOURTEEN (14) DAYS OF RECEIPT OF THIS NOTICE. THANK YOU FOR YOUR COOPERATION.

BY: .....

BY:
.....
CYPRESS RIDGE REVIEW BOARD