

**REDBRIDGE SQUARE HOA, INC.**  
**ARCHITECTURAL REVIEW APPLICATION**

PLEASE COMPLETE AND RETURN THIS FORM TO THE ADDRESS OR EMAIL BELOW.

WORK MAY NOT COMMENCE UNTIL THE COMMITTEE PROVIDES A WRITTEN APPROVAL.

SUBMIT YOUR APPLICATION TO: [INFO@ODINFLORIDA.COM](mailto:INFO@ODINFLORIDA.COM)

OR MAIL TO: Redbridge Square 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)

EXTERIOR PAINT      BASE \_\_\_\_\_ TRIM \_\_\_\_\_ GARAGE/DOORS \_\_\_\_\_

**PLEASE PROVIDE PAINT NUMBERS AND SAMPLES**

OTHER \_\_\_\_\_

PLEASE PROVIDE PROJECT DETAILS \_\_\_\_\_

**OWNER SIGNATURE/DATE** \_\_\_\_\_

- PLEASE ATTACH A PROPERTY SURVEY COPY LOCATING EXTERIOR CONSTRUCTION PROJECTS
- ATTACH PAINT / COLOR SAMPLES, PLANS, PHOTOS AS NEEDED TO DESCRIBE MODIFICATION
- ALL NECESSARY GOVERNMENTAL PERMITS REQUIRED ARE A CONDITION OF APPROVAL AND ARE THE OWNER'S RESPONSIBILITY TO OBTAIN THEM
- **NON-REFUNDABLE APPLICATION FEE--Applicant(s) must pay herewith the sum of \$25.00 as a NON-REFUNDABLE APPLICATION FEE for costs, expenses, and fees in processing the application.**
- ALL APPROVALS ARE SUBJECT TO INSTALLATION CONFORMING TO ASSOCIATION DOCUMENTS

***I further agree that all improvements, modifications, and/or alterations will comply with the Declaration of Covenants, Conditions, Easements and Restrictions for Redbridge Square and the Community Standards and Architectural Guidelines ("Governing Documents") in effect as of the date of this submission. I agree to bring any such improvement, modification, and/or alteration into compliance with the Governing Documents at my own expense even if this application was approved. I agree to not commence any work until this application is approved and I have obtained any necessary permits required by any city, county, or state agency."***

**OWNER SIGNATURE/DATE** \_\_\_\_\_

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**FOR USE BY ARCHITECTURAL REVIEW BOARD**

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 ASSOCIATION 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: \_\_\_\_\_ DATE: \_\_\_\_\_

REDBRIDGE SQUARE REVIEW BOARD

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