ELLINGSWORTH RESIDENTIAL COMMUNITY ASSOCIATION, INC.

C/O Community Management Specialists, Inc.
71 S. Central Ave
Oviedo, FL 32765
Phone: 407-359-7202
Fax: 407-971-1490 Email: ARC@cmsorlando.com

Management Company Only

HOA ACCT #: _____

Architectural Review Application | GENERAL

This request form is to be completed by the homeowner and submitted to the Architectural Review Committee via the Community Management Specialists, Inc. The request must be approved by the **ARC** or **Board of Directors** before any work commences. If approved, no further modifications or other alterations may be made without further approval of the review committee or Board. Please refer to the Declaration of Covenants, Conditions and Restrictions for a detailed description of the requirements, process and length of time for approval. If you are using heavy equipment such as dump truck, bobcat, fork lift, front end loader, etc… it is the responsibility of the homeowner to take every precaution to ensure no damage is done to the roadway, sidewalks, and any other common areas of the Association. Homeowner is solely responsible for restoring such areas to their original state. **If approved your application is valid for a period of 90-days only.**

To be completed by Homeowner:

Property Address: _____

Homeowner Name: _____ Day Phone#: _____

Mailing Address:(*if different from property*) _____

Email: _____ Homeowner Signature: _____

Please check type of Architectural Review Required | ALL REQUESTS MUST COMPLY WITH HOA GOVERNING LAW

PAINT

☐Painting with Existing Colors

"Existing colors" are the colors that are currently painted On the home and are within 10years of original ARC Approval or builder colors.

☐Painting with New Colors

"New colors" are colors that are completely different Than what is currently on the home. This category also applies to colors that are on the pre-approved list by the HOA/ARC. (two sets of 2x2" sample must be submitted)

ROOF

☐Roof with identical material/color

If roofing with identical material and color, no sample needed.

☐Roof with new material/color

12X12" Sample is required

FENCE & DECK

☐Fence Installation/Repair/Replacement

☐Deck Installation/Repair/Replacement

DOORS & WINDOWS

☐Garage Door Replacement

☐Front Door Replacement

☐Window Replacement

STRUCTURE

☐Room Addition

☐Patio/ Sunroom/ Pergola

☐Pool

☐Solar Rooftop Device

LIGHTING & IRRIGATION

☐Exterior Lighting Installation (decorative)

☐Landscape Lighting Installation

☐Irrigation System Installation

☐Well System / Installation

HARDSCAPING

☐Walkway Installation/Replacement

☐Paver ☐Concrete ☐Other

☐Patio Paver Installation/Replacement

☐Driveway Paver Installation/Replacement

☐Concrete Edging/ Color:_____

LANDSCAPE

☐Tree Removal/Addition

☐Sod New/Replacement

☐Flower Bed Installation/Removal/Replacement

OTHER

☐_____

_____

Note: THE FOLLOWING ITEMS NEED TO BE SUBMITTED ALONG WITH THIS FORM: (1) COPY OF PLOT PLAN/PROPERTY SURVEY SHOWING LOCATION OF MODIFICATION; (2) DRAWING AND OR COLOR SAMPLES

Please complete the following, if applicable:

Anticipated Start Date: _____ Estimated Completion Date: _____

Contractor: _____ Architect: _____

Phone: _____ **Phone:** _____

Additional Comments: _____

_____

_____

_____

NOTE: Requests and alterations must conform to all local Zoning and Building Regulations. You are required to obtain the required permits if your request is approved. If your request is denied by the ARC, you may appeal to the Board of Directors for review. If all required materials or information is not included with this form at the time of submission, the time period does not apply for approval/disapproval. If work does not *commence* within *90* days of *approval* you must resubmit the request for approval or request an extension in writing to the ARC Committee or Board of Directors for approval. Approval by the Association is contingent upon the Owner obtaining and complying with all necessary permit(s).

Conditions applicable to the Ellingsworth Residential COA ARC application:

1. I understand that compliance with the **Ellingsworth COA** and approval by the Architectural Review Committee (ARC) does not necessarily constitute compliance with the building and zoning codes or provisions of Seminole County.
2. Approval of any project by the ARC does not waive the homeowner's responsibility for obtaining the appropriate Seminole County permits and inspections as required. Further, obtaining required County permits do not waive the requirements for ARC approval.
3. I understand and agree that no construction or exterior alteration shall commence without written approval from the ARC. If alterations are made prior to receiving approval, I may be required to return the property to its former condition at my own expense if this application is disapproved wholly or in part, and that I may be required to pay all legal expenses incurred.
4. I understand that members of the ARC or of the Management Company may contact me for more information or clarifications regarding my request.
5. I understand that any approval is contingent upon construction or alterations being completed in a professional-like manner.
6. The ARC Committee or the Board of Directors will provide an ARC decision on all applications for alteration within 30 days of receipt of a properly and fully completed application.
7. The work must be performed strictly in accordance with the plans as approved. If after plans have been approved, the improvements are altered, erected, or maintained upon the Lot other than as approved, same shall be deemed to have been undertaken without ARC approval. If new ARC is not submitted and reviewed, I *may* be required to return the property to its former condition at my own expense.
8. **All supporting documents (i.e. drawings, illustrations, plot plans, plats & surveys) must be submitted with the application in order for the ARC application to be considered "complete"**.

Please email the **"completed",** original application to ARC@cmsorlando.com or mail the **"completed"** original application to:
Community Management Specialists, Inc.
71 S. Central Ave.
Oviedo, FL 32765

I have read and understand these conditions, _____
(Initials)

*****DO NOT WRITE BELOW THIS LINE. FOR OFFICE AND HOA USE ONLY*****

ARC and BOARD OF DIRECTORS OF THE ASSOCIATION USE ONLY

ARC Minutes and ruling:

Date Received, Mgmt:_____ Date to ARC:_____ Date to Homeowner:_____

Date of Meeting: _____ Location of meeting:_____
(full address must be entered or specific location)

Meeting Called to order at:_____ ☐ am ☐pm Meeting adjourned at:_____ ☐ am ☐ pm

Members Present at meeting and voting:

Member Name			**Member Name**		
	☐approved	☐denied		☐approved	☐denied
	☐approved	☐denied		☐approved	☐denied
	☐approved	☐denied		☐approved	☐denied
	☐approved	☐denied		☐approved	☐denied

Final disposition and voting: majority vote rules

☐ **Approved** ☐ **Disapproved/Denied** ☐ **Incomplete**

☐ Approved with the following conditions:_____

☐ Plans incomplete, information needed:_____

Comments:_____

By:_____ Date:_____
ARC Chairperson / ARC Member