

GLEN EAGLE HOMEOWNERS ASSOCIATION, INC.

ARCHTECTORAL REVIEW BOARD (A.R.B.) APPLICATION

This is a request form to be completed in **triplicate** by the homeowner and submitted to the Architectural Review Board (ARB) for approval **PRIOR TO** any work commencing. Please refer to your Declaration of Covenants and Restrictions for a description of the ARB and its purpose.

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THIS SECTION TO BE COMPLETED BY THE HOMEOWNER

ASSOCIATION NAME: _____ UNIT #/LOT # _____

NAME: _____ DATE: _____

ADDRESS: _____

E-MAIL ADDRESS: _____

PHONE (HOME): _____ (WORK) _____ (FAX) _____

ON A SEPARATE SHEET OF PAPER DESCRIBE THE CHANGE/ADDITION INSTALLATION: (i.e., Fence installation, Repaint exterior, Screen enclosure, Pool, etc.)

LOCATION: (Attach a copy of a survey showing where the addition is located)

SPECIFICATIOINS: (Attach three (3) copies of this ARB application, plans, estimates, color samples or pictures)

Dimensions: _____

Material (s): _____

Colors: _____

***Note:** This approval shall remain in effect for **sixty - (60)** days. Upon the expiration of the (60) day time period this application will become void, it will then be necessary to resubmit your application. You must also conform to all local Zoning Building Regulations and obtain all necessary permits if the Architectural Review Board approves your request.

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THIS SECTION TO BE COMPLETED BY ARCHITECTURAL REVIEW BOARD

DATE RECEIVED _____ DATE APPROVED _____ DATE DENIED _____

ARB SIGNATURES: _____ / _____ / _____

COMMENTS: _____

Forward to: Vista Community Association Management Inc.
P.O. Box 162147
Altamonte Springs, FL 32716-2147
(407) 682-3443 x 231
(407) 682-0181 FAX
E-Mail: dmccreight@vista-cam.com