

REQUEST FOR ARCHITECTURAL APPROVAL

{This is a request form to be completed by the homeowner and submitted to the Architectural Review Committee ("ARC") for approval **BEFORE** any work commences.}

Please complete in its entirety and return to: **Kingsfield Lakes Homeowners' Association, c/o Sunstate Management Group PO BOX 18809, Sarasota, FL 34276** or Email to: allapplications@sunstatemanagement.com

THIS SECTION TO BE COMPLETED BY THE HOMEOWNER

DATE: _____ LOT NO.: _____

NAME(S): _____ E-MAIL: _____

ADDRESS: _____

PHONE (HOME): _____ (WORK): _____

1- DESCRIBE THE CHANGE/ADDITION/INSTALLATION AND PROVIDE SUPPORT DOCUMENTATION AS MAY AID THE COMMITTEE IN DECISION, SUCH AS DIAGRAM, CONTRACTOR PROPOSAL (i.e. pool, screen enclosure, patio, landscaping, sidewalk/driveway pavers, etc.):

2- GIVE DESCRIPTION OF LOCATION (ATTACH A COPY OF THE PLOT PLAN/SURVEY SHOWING THE LOCATION OF THE ALTERATION, AS MAY BE APPLICABLE TO THE PROPERTY CHANGE):

3- SPECIFICATIONS (ATTACH A COPY OF THE PLANS, SUITABLE DRAWING OR PICTURE - MUST BE PROVIDED AS APPLICABLE TO THE PROPERTY ALTERATION):

DIMENSIONS: _____

MATERIAL(S): _____

COLOR (S) (sample or color chip – must be provided): _____

4- ESTIMATED TIME OF COMPLETION: _____

NOTE: ALL REQUESTS MUST CONFORM TO THE LOCAL ZONING AND BUILDING REGULATIONS AND OWNERS ARE RESPONSIBLE FOR OBTAINING THE NECESSARY PERMITS IF YOUR REQUEST IS APPROVED.

THIS SECTION TO BE COMPLETED BY THE MANAGEMENT COMPANY

REQUEST: DATE APPROVED: _____ DATE DENIED: _____

AUTHORIZED SIGNATURE: _____

ARC SIGNATURE: _____

ARC Comments or Conditions: _____

DATE RECEIVED BY SUNSTATE MGMT: _____ SENT TO ARC: _____ SENT TO H/O: _____