



498 Palm Springs Dr., Suite 210 Altamonte
Springs, FL 32701
Tel. 407-379-1455 Fax 407-379-1456

INSTRUCTIONS FOR ARCHITECTURAL REVIEW

Villas of Lake Destiny HOA, Inc.

1. The entire approval procedure may take between 3 and 4 weeks to complete. Therefore, please plan accordingly.
2. The Architectural Review Committee Form must be completed and approved BEFORE any work commences on the property.
3. This form must be completed in its entirety by the owner of the property. Failure to include applicable information will cause delays.
4. When applicable, a copy of the plat map for the property indicating the location of the change is also necessary.

5. Send the form by mail, fax or email to:

Signature Management Solutions

498 Palm Springs Dr. Suite 210

Altamonte Springs, FL 32701

Tel. 407-379-1455 Fax 407-379-1456

Email: MaryJo@sigmgmt.com

6. The management company will review the request and insure the request has been filled out correctly.
7. The management company will then forward the request to the Architectural Review Committee.
8. Once the Architectural Review Committee receives the request, they will contact the owner to set up an appointment to review the proposal.
9. The Architectural Review Committee will then make a decision based on the Declaration of Covenants and Restrictions which govern the association.
10. The Architectural Review Committee will forward the request along with their decision to the management company. The management company will then notify the owner in writing of the Architectural Review committee's decision.

Villas of Lake Destiny HOA, Inc.

Request for Architectural Review Committee Approval.

This is a request form to be completed by the Homeowner and submitted to the (ARC) Architectural Review Committee for approval **BEFORE** any work commences. If you have any questions concerning the application, please refer to your Declaration of Covenants and restrictions or contact Ingrid Baria with Signature Management Solutions at 407-379-1455 ext. 105

All Requests must conform to the local zoning and building regulations and you must obtain all necessary permits if your request is approved by the ARC. This request is valid for 90 days from the point of acceptance.

Name:

Lot #:

Address:

Describe the Change: (i.e. porch, fence, landscaping, or painting, etc.)

Location: (attach a copy of plans showing location of addition)

Specifications: (attach a copy of plans and describe the following)

Dimension:

Materials:

Color: (attach a sample paint, chip with color, name and number, Paint manufacturer)

Liability: I take full responsibility and am personally liable for any damage that might occur to Association Property during the completion of the project.

Signature _____ Date: _____

HOMEOWNER ARCHITECTURAL REVIEW COMMITTEE
REVIEW BY:

FINAL APPROVAL: _____

DATE: _____

DENIED:

DATE: