## SOUTHSHORE FALLS ARCHITECTURAL REVIEW BOARD (ARB) APPLICATION DO NOT FILL OUT THIS APPLICATION UNTIL YOU HAVE READ AND CHECKED ALL GUIDELINES SIGNED AND ATTACHED ALL DOCUMENTATION (page 1 & 2)

## \*\*APPLICATION SUBMISSION WITH SUPPORTING DOCUMENTS DUE BY 4:00PM TUESDAY PRIOR TO NEXT ARB MEETING\*\*

NAME:		DATE:		
ADDRESS (where work is to be do	one):			
PHONE:				·
EMAIL:				
( ) Single Home				
( ) 2 Unit Villa Front Ent. (		nt.		
( ) 4 Unit Villa ( ) End unit	( ) Middle			
PROJECT TYPE ( ) Landsc ( ) Screening ( ) Lanai	_	-		
TREE REQUEST (MUST BETTER Type	Height	Diameter at breas	t height	
If removal: Tree Replacement	t			
BRIEF PROJECT DESCRIPT	ION (USE ADDITIO	ONAL SHEET IF NECESS	SARY)	
NAME OF CONTRACTOR OR			ırance	
REQUIRED SUBMISSIONS:CI			Y N	
Plot Plan	Yes No N/A	Survey	Yes No	
Contract	Yes No	Materials Sample	Yes No N/A	
Brochure/color pictures	Yes No	Paint Chips	Yes No	
Signed Project Agreement	Yes No	Proposed Start Date		
DATE APPROVED:				
ARB MEMBER SIGNATURE_				
COMMENTS:				

## PLEASE COMPLETE CHECKLIST OR REQUEST WILL BE DENIED. I have made only ONE change/improvement request on this application (multiple requests on one application will be returned for correction and will delay the process). I do not have any outstanding issues with the HOA to include suspension of privileges, delinquency on HOA dues or event fees, unpaid fines or under a current violation awaiting resolution. I understand that all expenses are my responsibility, and the HOA will not be held accountable for any issue, damage, or contractor error. I agree to ensure all applicable code, regulations, and required permits are followed and displayed prior to work starting. \_I verify that actual construction or building modifications will be done by licensed and insured contractors. The contractor(s) will provide to the resident and management Certificate of Insurance and Liability to be kept on file. I understand that all irrigation movement, replacement, or installation must be done by our contracted HOA landscape contractor. I ensure that all cables, pipes, fasteners, phone lines, conduit and direct TV attachments will be painted the home exterior color only. I ensure that applicants, applicant agents, or contractors shall not use any portion of the association property other than roads, or any other portion of the zero-lot line easement of the applicant's lot for the purpose of gaining access. I understand that any legal or regulatory agency at any time in the future may require a modification to this variance and if so, it will be done completely at my expense. I understand and agree that the contracts, scope of work, insurance certificates and invoices pertaining to this project are authentic and the sole responsibility of the owner. I have included specifications for the change, including any materials, paint chips, pictures etc. Pictures and brochures with sizes will reduce the amount of description needed on this application. I ensure that my contractor/handyman will be notified about and will adhere to all SSF HOA governing documents. I have completed all blanks on the application form (including contact information, address, and clear description of the intended change/improvement). One original of the entire application including all additional materials are included. If required, I have included the site survey and have depicted the location of the proposed change/improvement. OWNER SIGNATURE DATE