

HUNTERS RIDGE COMMUNITY ASSOCIATION
28400 Hunters Ridge Blvd ♦ Bonita Springs, FL 34135
239-992-4900 Fax/239-992-9138

Request for Architectural Change

This request form is to be completed by the homeowner and submitted for approval **prior to any work commencing**. Any samples submitted may NOT be returned. Return the completed form via mail, fax, or email (admin@huntersridge-ca.com). If you have any questions concerning this application, please contact the Hunters Ridge Community Association Administration Office at 239-992-4900.

| TO BE COMPLETED BY HOMEOWNER | | | | | | |
|---|-------------|--------------------|---------------|--|--------------|-------------|
| Name: | | | | | | |
| Hunters Ridge Address: | | | | | | |
| Phone/Cell: | | | EMAIL: | | | |
| Project Type: (Please Circle) | Landscaping | Patio/Lanai | Pavers | Hurricane Protection Devices/Shutters | Painting | |
| Additions/Pool | | Re-Roof/Roof Tiles | | Replace Window/Door | | Lighting |
| Describe the request. If painting, is your color choice on the approved list? <input type="checkbox"/> Yes <input type="checkbox"/> No Please list color and attach color samples. Off palette samples must be at least 8x10 inch size. | | | | | | |
| Materials/Color: (Attach/Submit all color samples for all materials, painting, pavers, aluminum, etc.) | | | | | | |
| Base: | | Trim: | | Doors: | | Front Door: |
| Garage Door: | | | | | | |
| Location and Specifications: | | | | | | |
| Contractor/Onsite Supervisor/Cell Phone for Supervisor: | | | | | | |
| Liability: I take full responsibility and am personally liable for any damage that may occur to Hunters Ridge Community Association property during the completion of this project. | | | | | | |
| Homeowner Signature: | | | | | Date: | |
| General Manager Review and Recommendation: | | | | | | |
| TO BE COMPLETED BY ARCHITECTURAL REVIEW BOARD: | | | | | | |
| ARB Decision: <input type="checkbox"/> Pending <input type="checkbox"/> Request Approved <input type="checkbox"/> Request Approved with Comments <input type="checkbox"/> Request Denied | | | | | | |
| ARB Members' Signatures & Date | | | | | | |
| 1. | | | 4. | | | |
| 2. | | | 5. | | | |
| 3. | | | 6. | | | |
| Comments by ARB: | | | | | | |
| <i>This approval is valid for 90 days from the date of acceptance and work must be started during this time. All requests must conform to the local zoning and building regulations, and you must obtain all necessary permits.</i> | | | | | | |