

**NORTHRIDGE LAKE COUNTY HOMEOWNERS ASSOCIATION, INC.**

**ARCHITECTURAL REVIEW APPLICATION**

This form is to be completed by the homeowner and submitted to the Architectural Review Board for approval **PRIOR** to commencement of any work. Mail completed application to: **SENTRY MANAGEMENT, INC.**

**PHONE: 352-243-4595**

**1645 E. HWY 50, SUITE 201**

**FAX: 352-243-4597**

**CLERMONT, FL 34711**

**YOUR APPLICATION MUST HAVE ALL SUPPORTING DOCUMENTATION TO BE CONSIDERED COMPLETE.**

**PLEASE ALLOW UP TO THIRTY (30) DAYS UPON RECEIPT OF A PROPERLY COMPLETED APPLICATION TO RECEIVE A DECISION FROM THE BOARD OF DIRECTORS. INCOMPLETE APPLICATIONS WILL ONLY BE PROCESSED ONCE ALL INFORMATION IS RECEIVED IN ACCORDANCE WITH THE COVENANTS AND RESTRICTIONS.**

**Please print clearly and provide all information required.**

Owner(s) name: \_\_\_\_\_ Date: \_\_\_\_\_

Property Address: \_\_\_\_\_ Lot #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Home #: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Work #: \_\_\_\_\_

**ATTACH ALL APPLICABLE INFORMATION PERTINENT TO YOUR REQUEST**

**DESCRIBE ADDITION, CHANGE, OR INSTALLATION:** (i.e. fence, screened enclosure, pool, exterior paint, landscaping)

\_\_\_\_\_  
\_\_\_\_\_

**ATTACH A COPY OF THE PROPERTY SURVEY OUTLINING WHERE ADDITION OR INSTALLATION WILL BE LOCATED**

**SPECIFICATIONS: (attach copies of plans, estimates or pictures, add additional pages if needed) PROVIDE A PICTURE OR BROCHURE OF THE FENCE STYLE. (POSTS MUST FACE INWARD NOT PERMITTED ON RETENSION PONDS)**

Dimensions: \_\_\_\_\_ Color: \_\_\_\_\_

Materials: \_\_\_\_\_

Fence Style: \_\_\_\_\_

**AN APPROVED PAINT COLOR SCHEME MUST BE LISTED FOR ALL EXTERIOR PAINT SUBMISSIONS**

Exterior Paint Scheme # \_\_\_\_\_ (Sherwin Williams) *Please include color swatches (chips) with application.*

Body Color: \_\_\_\_\_ Trim Color: \_\_\_\_\_

Hi-Lite Color: \_\_\_\_\_ Accent Color: \_\_\_\_\_

Garage Door Color: \_\_\_\_\_

Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE: Requests and alterations must conform to all local Zoning and Building Regulations. You are required to obtain the proper permits if your request is approved. If your request is denied by the ARB, you may appeal to the Board of Directors for review.**

**FOR USE BY MANAGEMENT**

Comments: \_\_\_\_\_  
\_\_\_\_\_

**FOR USE BY THE BOARD OF DIRECTORS**

BOD Comments: \_\_\_\_\_  
\_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_