

SADDLEBROOK HOMEOWNERS' ASSOCIATION
ARB EXTERIOR ALTERATION FORM

FAILURE TO SUBMIT AN ARB FORM PRIOR TO WORK PERFORMED MAY RESULT IN A FINE OF UP TO \$1,000.

Homeowner's Name: _____ Phone # _____
(Please print)

Street Address: _____

To protect each owner's rights and property values we require that any owner considering making improvements or alterations to their home or property submit either an ARB Painting Form or ARB Exterior Alteration Form to the Architectural Review Board **PRIOR** to beginning work or purchasing supplies. Receipt of county approvals DOES NOT constitute approval by the Association and is **NOT** approval for you to begin work.

Brief description of the improvement: _____

1. Who will perform the work? _____
2. Are permits required? Y / N Date obtained: _____
3. Start Date: _____ Completion Date: _____

I/we hereby request ARB approval for the (check one) following at our address listed above.

THE MORE DETAIL YOU PROVIDE, THE FASTER WE CAN APPROVE THIS!

VERBAL APPROVALS FROM A BOARD MEMBER AND/OR AN A.R.B. MEMBER ARE NOT VALID!

- _____ Exterior color change/need to submit ARB Paint Form
- _____ Construction of an addition to the residence
- _____ Installation of a new roof/ Manufacturer _____ Color _____
- _____ Installation of fence, wall, hedges or mass planting
- _____ Modification of slopes or swales
- _____ Installation of a pool. Homeowner agrees to the following:
 - 1. Ensure that any damage done to sidewalk is repaired so that sidewalk height and integrity in repaired area corresponds with adjoining undamaged sidewalk.
 - 2. Homeowner will keep construction debris and dirt swept from street and sidewalk areas where construction equipment enters and leaves lot.
- _____ Removal of tree(s) greater than 4" caliper and or 4 1/2 feet tall.
- _____ Installation of gutters
- _____ Other _____

Please attach a copy of your survey indicating the location of the proposed improvement(s), along with a copy of the plans. Please also include 1) An **elevation (eye-level view)** of the project. 2) An **overhead (birds-eye view)** of the proposed project.

I understand that this does not verify compliance with building, zoning, or other county/city codes, since obtaining the proper permits (Orange Cty. Building & Zoning Dept. 407-836-5550) is mandatory and is solely my responsibility. I further agree that I will be responsible for upkeep, maintenance, repair or replacement of additions or changes as stated above on this agreement. I also agree that I will **NOT** begin work until I have written approval.

Signature of Saddlebrook Homeowner _____

Date _____

Project must commence within 90 days of approval or a resubmission will be necessary.

Please do not write in this area

____ Approved ____ Approved **with conditions** ____ Disapproved ____ / ____ / ____ Date
ARB Initialed #1 ____ #2 ____ #3 ____ #4 ____ Board Member Sign Off Initialed _____

ARB NOTES: _____

Leland Management - Jill Rygh, Primary Property Manager - Office Phone 407-233-3520

POSTAL MAIL TO:
Attn: ARB
Leland Management
6972 Lake Gloria Blvd
Orlando, FL 32809

EMAIL TO:
Jill Rygh
jrygh@lelandmanagement.com

FAX TO:
Attn: ARB
Jill Rygh
407-233-3521