

ROYAL ARMS CONDOMINIUM ASSOCIATION, INC.

Architectural Review Application

Name: _____

Property Address: _____

Mailing Address: _____

Home Phone: _____

Cell Phone: _____

In accordance with the Declaration of Covenants, Conditions and Restrictions, I hereby request your consent to make the following change, alteration and/or renovation to my property.

- Fence Swimming Pool Patio Screen Enclosure Exterior Color
 Landscaping Lawn Replacement Window Door Other

Description: _____

Attach a copy of the property survey (if applicable) that show the location of the proposed change, alteration, renovation and/or alteration. Attach drawing or blueprint of your plan(s). Attached color samples, if applicable.

Note: Application submitted without a copy of the property survey (if applicable), drawing or blueprint, or color sample will be considered incomplete and will not be approved.

I/We, by affixing our signature(s) below hereby agree to the following stipulation:

- No work will begin until approval is received from the Association.
- All work will be done expeditiously once commenced and will be done in a good workmanlike manner by myself or by a licensed contractor.
- All work will be performed at a time and in a manner so the minimize interference and inconvenience to other residents.
- I/We assume all liability and will be responsible for all damage to other property and/or common area or injury which may result from the performance of this work.
- I/We will be responsible for the conduct of all persons, agents, contractors, sub-contractors and employees who are connected this this work.
- I/We am/are responsible for complying with and will comply with all applicable federal, state and local laws, codes, regulations and requirements in connection with this work, and I/we will obtain any necessary governmental permits and approvals for the work.
- Upon receipt of this Application, the Property Manager will forward it to the Board for consideration. Decision by the Board may take up to 30 days. I/We will be notified in writing when the Application is approved or denied.

Signature: of Owner(s): _____

Date: _____

Submit application to: Royal Arms Condominium Association, Inc., 500 Orange Dr., Altamonte Springs, FL 32701.

DO NOT WRITE BELOW THIS LINE

This application is hereby: Approved Disapproved

Date: _____

By: _____

Comments: _____

Dates: Received from Owner: _____

Forward to Board: _____

Return to Owner: _____