

OAK BLUFF ESTATES HOMEOWNERS ASSOCIATION, INC

12620-3 Beach Blvd. #301. Jacksonville, FL 32246

Email: ARB-M-Z@KingdomManagement.com

ARCHITECTURAL REVIEW REQUEST FOR PROPERTY IMPROVEMENT

Owner's Name _____

Property Address _____ Lot No. _____

Phone _____ E-Mail _____

Owner's Mailing Address (If different from above) _____

What type of project/improvement are you requesting? _____ Fence _____ Siding _____ Pool/Hot Tub _____ Exterior Painting
_____ Deck/Patio/Enclosure _____ Outbuilding _____ Other (Provide details) _____

Contractor (Name & Phone #): _____

For your application to be complete, please provide us with the following information:

- 1) Please provide a complete description of your project/improvement, being as detailed as possible including contractor.
- 2) Type of materials to be used and sample colors if applicable.
- 3) Drawings, brochures, photos, etc.
- 4) Copy of most recent certified lot survey showing location of proposed improvement/project.
- 5) If repainting, you must supply color swatches of new colors, (obtain from paint store) color of roof, and brick or accent masonry colors.
- 6) If installing vinyl siding, submit sample of siding type, color sample of siding and trim colors, colors of roof and any masonry on your home.
- 7) If installing a new roof, you must supply color sample of shingle, type of shingle and manufacturer.
- 8) If having a pool installed, you must indicate what type of access you plan to use for trucks, equipment, etc.
- 9) Any damage to sidewalks, curbs, roads, grasses, and common grounds of OAK BLUFF ESTATES HOMEOWNERS ASSOCIATION, Inc will have to be restored to its current condition and will be the responsibility of the homeowner making this request.

NOTE: *It is the responsibility* of the *Homeowner/Contractor* to *secure all necessary permits from the City of Jacksonville and to comply with the Local Building Codes for setbacks from property lines, retention ponds, existing structures, easements, and safety requirements.*

Owner's Signature _____ Date _____

**Only the homeowner of record may request architectural approval. Approved projects must be substantially completed within 3 MONTHS or you must resubmit once commenced. The approved construction must proceed diligently.*

ARCHITECTURAL REVIEW BOARD USE ONLY

Date Received _____ Received By _____

ARB Decision: Approved Denied Date _____

ARB Member Signature _____

ARB Comments:

NOTE: THIS APPROVAL IS FOR ARCHITECTURAL REVIEW PURPOSES ONLY. IT DOES NOT OVERRULE ANY LOCAL, STATE, OR FEDERAL GUIDELINES OR PERMITS REQUIRED FOR THE DESIRED CONSTRUCTION. IT IS THE LOT OWNER'S RESPONSIBILITY TO OBTAIN AND COMPLY WITH SUCH. **YOU ARE UNDER A LEGAL OBLIGATION TO COMPLY WITH ALL RECORDED COVENANTS AND RESTRICTIONS AFFECTING YOUR PROPERTY.** THE ARCHITECTURAL COMMITTEE REVIEW OF YOUR PLANS WAS LIMITED TO THE ASSOCIATION'S ARCHITECTURAL REVIEW GUIDELINES. THIS LETTER DOES NOT CONSTITUTE A WAIVER OF THE ASSOCIATION'S OR OTHER PARTIES' RIGHT TO LEGALLY ENFORCE ALL PROVISIONS OF THE COVENANTS AND RESTRICTIONS WITH WHICH YOU MUST COMPLY.