## VILLAGES OF NORTHWOODS HOMEOWNER'S ASSOCIATION, INC.

c/o Property Management Partners & Associates, Inc. P.O. Box 600033 Jacksonville, FL 32260 Phone: 904-460-2785 x 19

Email: jo@pmpstjohns.com

## REQUESTING FOR ARCHITECTURAL APPROVAL

This request form is to be completed by the homeowner and submitted to the Board of directors for approval BEFORE any proposed work commences. Submit a separate form for each revision. If you have any questions concerning this application, please contact Jo Davis, CAM: jo@pmpstjohns.com DO NOT MAIL IT DELAYS APPROVAL

Please provide the follow	ring information:			
Today's date:	Ema	ail		
Homeowner's name:				
Property address:				
Phone (days):	(nights)	Cell		
Proposed improvement: _				
·			and copy of contractor's proposal.)	
Specifications:				
<ul><li>Dimensions</li></ul>				
<ul><li>Materials</li></ul>				
Color				
<ul><li>Contractor</li></ul>				
Estimated beginning date	9:	Estimated completion	n date:	
Owners Signature:		Date:		
FOR BOARD USE:				
Reviewed by:		Date:		
Approved:	Denied:	Conditional App	Conditional Approval:	
Comments:				
Homeowner notified	by:	return mail	telephone	
	Mamt Received	Forwarded to	ARC	