

**Lakeview Woods Property Owners Association, Inc.**

7750 SW 60<sup>th</sup> Avenue, Suite A

Ocala, FL 34476

Phone: (352) 653-2034/Fax: (352) 653-2033

Chrisann Orlando-Lowder, LCAM, CMA, AMS

[colowder@lelandmanagement.com](mailto:colowder@lelandmanagement.com)

**Architectural Review Request**

Submit completed form to Chrisann Orlando-Lowder at the e-mail, fax, or mailing address above.

Property Owner: \_\_\_\_\_

Please Print

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

Mailing Address: \_\_\_\_\_

(If different)

Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Work #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Fax #: \_\_\_\_\_

**Architectural Review Application For:**

\_\_\_\_ Satellite Dish

\_\_\_\_ Landscaping

\_\_\_\_ Shutters

\_\_\_\_ Fencing

\_\_\_\_ Exterior Paint Colors

\_\_\_\_ Swimming Pool

\_\_\_\_ Out Building

\_\_\_\_ Exterior Door

\_\_\_\_ Solar Panels

\_\_\_\_ Other \_\_\_\_\_

**Attachments from property owner:**

- \_\_\_\_\_ Written request describing addition, change, or installation
- \_\_\_\_\_ Property survey showing where addition or installation is to be located
- \_\_\_\_\_ Specifications (copies of plans indicating dimensions, materials, color, etc.)
- \_\_\_\_\_ Other (paint chip(s), color samples, pictures, brochures, etc.)

**NOTE:** Work cannot begin until Architectural Review Board has provided written approval of the application and must be completed within 90 days of approval date.

**For use by the Board of Directors only:**

\_\_\_\_\_ Date Received                      \_\_\_\_\_ Date Submitted to ARB                      \_\_\_\_\_ Date Returned to Owner

\_\_\_\_ APPROVED with the following comments:

1. You must conform to all local zoning and building regulations.
2. You must obtain any and all permits that are required.

\_\_\_\_ Information received is incomplete. The following information is required: \_\_\_\_\_

\_\_\_\_ DENIED

By: \_\_\_\_\_ Date: \_\_\_\_\_

Board of Directors