ASSOCIATION OF POINCIANA VILLAGES,





Homeowner Name:			
Property Address:			
Phone:	Home Cell	Work	
Email:			
and the Association of P the Association's guideli make the following char	Design Control Board criteria, Dec Poinciana Rules and Regulations, Ir ines. Any variance could result in v nge, alteration, renovation and/or pry of the request: (Only 1 Change	nstallation must conform violations and/or fines. I haddition to my property:	exactly to this approval and ereby request consent to
Fence	Exterior House Color	Solar Panel	Patio
Screen enclosure	Landscape/Lawn Ornament	Driveway/Walkway	Storage Shed
Swimming Pool	Home Addition	Pergola/Gazebo	House Roof
Other	Screen/Sunroom	Green House	Window AC Unit
·	oval, be sure to indicate the <u>color</u> and enoted on the property survey. Any rural plans.		
https://www.sherwin-will	iams.com/homeowners/color/find-a	nd-explore-colors/hoa/poin	ciana/fl/poinciana-villages/
Describe the change, add	ition & installation, and the location	<u>:</u>	

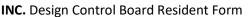
I hereby understand and agree to the following conditions:

- 1. No work will begin until written approval is received from the Association. I have 90 days from the approval date to complete the work. If not, then I must reapply for ARC approval.
- 2. Attached is a copy of the property survey that shows the locations of the proposed change, alteration, renovation, or addition. Attached are pictures, drawings, color samples of paint, plant, pavers and/or sample of material for review by the Design Control Board.

EMAIL TO: DCBPoinciana.FL@fsresidential.com FAX NUMBER: 863-313-9233 OR MAIL APPLICATION TO: 2190 Marigold Ave, Poinciana FL 34759 PHONE NUMBER: 863-427-0900 EXT. 609

Page | 1 08/11/2023

ASSOCIATION OF POINCIANA VILLAGES,





- 3. All work will be done expeditiously once commenced and will be done in a professional manner by a licensed contractor or myself minimizing interference and inconvenience to other residents.
- 4. I assume all liability and will be responsible for any and all damages to other lots and/or common area, which may result from performance of this work.
- 5. I will be responsible for the conduct of all persons, agents, contractors, subcontractors, and employees connected with this work.
- 6. I am responsible for complying with all applicable federal, state, and local laws, codes, regulations, and requirements in connection with this work. I will obtain any necessary governmental permits and approval for the work.
- 7. I will be notified in writing when the application is either approved or denied. Not receiving an approval does not waive the requirement to have written approval before work begins. Please allow 30 working days for the application review process.
- 8. Pending applications will have 2 weeks from review date to be re-submitted along with missing information/documents. Failure to re-submit within the time allotted will result in an expired application; a new application must be submitted for review if the homeowner wishes to continue with the proposed modification.
- 9. Within 7 calendar days of completing the approved project, Homeowner must submit color pictures of completed change along with a copy of the original approved ARC request form.
- 10. Prior to commencing any construction, a county building permit must be obtained, and a copy must be provided to the Design Control Board Department.

All applications must be submitted with all supporting documents needed for each project.

DID YOU INCLUDE ALL REQUIRED APPLICABLE ITEMS?

	Signed Application		
	Official Property Survey with location of changes		
	Complete set of architectural plans		
	Drawings/Sketch		
	Color Pictures of proposed change		
	Color Samples Sample of materials		
	Vendor proposal indicating height, shape, materials & colors to be used		
Proi	perty Owner(s) Name Printed:	Date:	
	erry owner(s) realise rifficed.	Bate	
Sign	ature of Property Owner(s):	_	
Date	Received by Staff Member:		

EMAIL TO: <u>DCBPoinciana.FL@fsresidential.com</u> FAX NUMBER: 863-313-9233 OR MAIL APPLICATION TO: 2190 Marigold Ave, Poinciana FL 34759 PHONE NUMBER: 863-427-0900 EXT. 609

Page | 2 08/11/2023