

HOMES OF DORAL LANDINGS HOMEOWNERS ASSOCIATION, INC.

REQUEST FOR ARCHITECTURAL CONTROL REVIEW

Please deliver or mail this form with the required plans and specifications to:
Security Guard House or to
Courtesy Property Management
Attention: Yamile Hernandez
13250 SW 135 Ave Miami, FL. 33186

Name of Owner(s): _____

Street Address: _____

Daytime Phone _____ Evening Phone: _____

Approval is hereby requested for the following as described below and on attached pages:

Check applicable box and/or describe below

- | | | |
|---|---|--|
| <input type="checkbox"/> Doors Identical | <input type="checkbox"/> Garage Door | <input type="checkbox"/> Roof Repair |
| <input type="checkbox"/> Driveway Identical | <input type="checkbox"/> Hurricane Shutters | <input type="checkbox"/> Satellite 18" Antenna |
| <input type="checkbox"/> Driveway Reseal Identical | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Play Structure |
| <input type="checkbox"/> Exterior Identical | <input type="checkbox"/> Patio | <input type="checkbox"/> Wall/Fence |
| <input type="checkbox"/> Exterior Paint Identical Color | <input type="checkbox"/> Pool | <input type="checkbox"/> Window Treatments |
| <input type="checkbox"/> Roof Identical | <input type="checkbox"/> Awning | <input type="checkbox"/> Other |

Other: _____

This is a re-submittal Yes No

Please include all pertinent information such as: dimensions, materials, color, design, location, and any other data.

Please check appropriate boxes:

- | | |
|---|---|
| <input type="checkbox"/> initial plans and/or specifications attached | <input type="checkbox"/> color plan/samples attached |
| <input type="checkbox"/> revised plans and/or specifications attached | <input type="checkbox"/> materials designation plans |
| <input type="checkbox"/> Drainage surface water plan attached | <input type="checkbox"/> plans designed by owner |
| | <input type="checkbox"/> vendor's license & insurance |

Completion Time: _____ Commencement Date: _____

Owner's Signature: _____ Owner's Signature: _____

(FOR ACC USE ONLY)

Date Application Received ____/____/____

Date of Approval /Disapproval ____/____/____

Approved _____ Disapproved _____

Architectural Control Committee

Your approval is subject to the following:

1. You are responsible for obtaining any necessary permits from the appropriate Building and Zoning Departments.
2. Access to areas of construction are only to be allowed through your property and you are responsible for any damages done to the Common Areas during construction.
3. Make sure there is no debris or garbage where it could be seen.

Explanation of Disapproval Attached.