

**PHILLIPS LANDING MASTER COMMUNITY ASSOCIATION INC.
ARCHITECTURAL REVIEW APPLICATION**

**PLEASE COMPLETE AND RETURN THIS FORM TO THE ADDRESS OR EMAIL BELOW. WORK
MAY NOT COMMENCE UNTIL THE COMMITTEE PROVIDES A WRITTEN APPROVAL.**

PHILLIPS LANDING MASTER COMMUNITY ASSOCIATION INC.

c/o Artemis Lifestyles

1631 E Vine Street Suite 300, Kissimmee, FL 34744

PHONE: 407-705-2190 • kbudsberg@artemislifestyles.com

PROPERTY ADDRESS: _____ DATE: _____

PROPERTY OWNER: _____

MAILING ADDRESS (IF DIFFERENT THAN PROPERTY): _____

PHONE: _____ E-MAIL: _____ FAX _____

PRIMARY CONTACT (IF DIFFERENT THAN PROPERTY OWNER):

NAME & RELATION TO PROPERTY OWNER: _____

PHONE: _____ E-MAIL: _____ FAX _____

DESCRIBE IN DETAIL THE ADDITION, CHANGE, OR INSTALLATION TO BE REVIEWED BY THE ARCHITECTURAL REVIEW BOARD:

EXTERIOR PAINT: BASE _____ TRIM _____ GARAGE/DOORS _____

ALL COLORS LISTED ABOVE MUST BE THE SHERWIN WILLIAMS APPROVED COLORS ON WEBSITE: WWW.PHILLIPSLANDING.COM

YOU MAY USE PAINT COMPANY OF YOUR CHOICE – THEY CAN MATCH THE APPROVED SHERWIN WILLIAMS COLORS (SAMPLE COLORS AT GATE HOUSE)

LANDSCAPING (DETAILED PLANS MUST BE ATTACHED) BLACK ALUMINUM FENCE (Please include fence photo & location on survey copy)

OTHER PLEASE PROVIDE PROJECT DETAILS/PLANS/PHOTOS _____

OWNER SIGNATURE

- PLEASE ATTACH A PROPERTY SURVEY COPY LOCATING **EXTERIOR CONSTRUCTION PROJECTS** (IF APPLICABLE)
- ATTACH **DETAILED PLANS** OR PHOTOS AS NEEDED TO DESCRIBE MODIFICATION
- ALL GOVERNMENTAL PERMITS REQUIRED ARE A CONDITION OF APPROVAL AND ARE THE OWNER'S RESPONSIBILITY TO OBTAIN
- ALL APPROVALS ARE SUBJECT TO INSTALLATION CONFORMING TO ASSOCIATION DOCUMENTS AND THIS APPROVAL DOCUMENT
- CONSTRUCTION MUST BE COMPLETE WITHIN SIX (6) MONTHS OF APPROVAL DATE.

DATE HOA RECEIVED _____ DATE TO ARB _____ DATE RETURNED TO HOMEOWNER _____

THE ARB'S DECISION ON THE PLANS SUBMITTED IS AS FOLLOWS:

APPROVED - MUST CONFORM WITH ASSOCIATION'S COVENANTS AND PERFORMED WITHIN 6 MONTHS OF APPROVAL

APPROVED WITH THE FOLLOWING CONDITION _____

REJECTED (OR) PLANS INCOMPLETE: INFORMATION REQUESTED / RESUBMITTAL REQUIRED _____

BY: _____ DATE: _____

PHILLIPS LANDING MASTER COMMUNITY ASSOCIATION INC.
ARCHITECTURAL REVIEW BOARD