

GRAND CYPRESS ON LAKE TARPON HOMEOWNERS' (GCLT) ASSOCIATION

Architectural Review Board (ARB) Application

Homeowners contemplating ANY architectural improvements or changes that will affect the external appearance of their home or property are required by our Association's Covenants to seek and obtain GCLT ARB approval BEFORE such improvements or changes are implemented. Failure to obtain such approval may subject the homeowner to fines or additional expense for corrective action.

Homeowners must complete all sections of this application, sign, and deliver it to the GCLT HOA, Resource Property Management Office, 28100 US 19, Suite 205, Clearwater, FL 33761, 727-796-5900, with required supporting documents. Please read and comply with all instructions or your application will be delayed.

Generally, ANY architectural improvements or changes to the exterior appearance of properties, such as painting, fences, landscaping (including removal of trees), screen enclosures, shutters, pool, etc., require approval.

You may wish to consult GCLT Covenants and ARB Guidelines (2019 Revision 1.3) before submitting this application.

Owner Name (Print): _____ Date: _____

Address: _____ Lot No.: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Summary of proposed change(s). Attach supporting documents* required by the latest ARB Guidelines:

*Site Plan: proposed change(s) should be indicated including dimensions and distances from adjacent property/houses. All boundaries, setback, easement lines and existing fences must be shown. Material/Color: Samples of the materials and colors to be used and an indication of the existing colors and materials should be provided. Drawings/Photographs: A graphic description should be provided. May be in the form of manufacturer's literature or photographs as well as freehand or mechanical drawings. Contractors proof of insurance and Florida License should be submitted with this application, if applicable. Please see **WHAT TO INCLUDE IN AN APPLICATION TO THE ARB** for a more complete listing of required supporting documents. It is the homeowner's responsibility to obtain all County or State approvals.

Signature of neighbors suggested but NOT required.

Left Side _____ Right Side _____

Signature of Applicant: _____ Date: _____

ARB DECISION

() Returned Without Action () Need more details to understand request.

() Approved as is

() Approved with the following conditions:

() Disapproval. You may revise plan or appeal.

ARB Signatures: _____

ARB FINAL INSPECTION

Date of Inspection: _____ () Meets requirements () Does not meet requirements

Comments: _____

ARB Name/Signature: _____