

TIMBERLANE POA

Application for Architectural Review Board approval

Instructions for the use of this form: One application per feature or installation of improvement is required (i.e.: One for pool, one for screen, one for fence and so on). An application may be considered incomplete if not accompanied by a plot plan showing setbacks (if fencing, pool or planting) and planned improvements. Incomplete applications will be denied and returned to the Owner in request of more information – taking more time for approval.

Once complete – either remit via email to clermont@premiermgmtcfl.com or by mail in care of Premier Association Management 375 E. Highway 50, Clermont FL 34711. The form may also be delivered to a member of the ARB or Board.

Please note that the ARB holds monthly meetings for the review of applications – these are noticed by signage in the Community or refer to the website: www.timberlanepoa.com

Property Address: _____ Appl. Date: _____

Property Owner(s): _____ Phone No.: _____
_____ Alt Phone No.: _____

Mailing Address: _____ E-Mail: _____

Contractor Name: _____ License No.: _____
=====

Brief description of Improvements:

Application review is for the purpose of compliance with the Architectural Design Standards and the Declarations of Covenants, Conditions and Restrictions and to encourage architectural compatibility within the Timberlane Sub-Division. Decisions of the Architectural Review Board shall not entitle any person to rely thereon in respect to the conformity with any laws, regulations, codes or ordinances, or with respect to the structural integrity or other conditions of the proposed improvements. The Owner is responsible for all plans and permits as required by Lake County and all required insurances. No construction shall begin prior to written ARB approval. Failure to adhere to this requirement may result in removal or replacement of improvements at Owner's expense. This application will be considered denied if not accompanied by a plot plan, showing setbacks (if fencing, pool or planting) and planned improvements. Separate applications are required for each installed or modified feature.

Signature of Applicant: _____ Date: _____
Applicant contact info: (phone) _____ (email) _____

*****THIS SECTION FOR ARB USE*****

ARB Comments: _____ Approved
_____ Conditional Approval
_____ Disapproved
ARB Signature: _____ Date: _____ Incomplete Application

APPLICATION ATTACHMENTS CHECKLIST:

- Completed Application by Owner**
- Plot map of Lot showing residence and setbacks with improvements/modification noted on map**
- Supporting documents – material data sheet, contractor license/insurance information**
- Owner contact information – VERY IMPORTANT!**

THANK YOU FOR YOUR SUBMITTAL!