

AVONDALE GROVE HOMEOWNERS ASSOCIATION

P. O. Box 5091 Plant City, Florida 33563-5091  
PHONE: 813-704-5192  
WWW.AVONDALEGROVESHOA.COM

ATTENTION: ARCHITECTURAL REVIEW COMMITTEE (ARC)

**\*\*PLEASE DO NOT BEGIN ANY WORK UNTIL APPROVAL IS GIVEN IN WRITING\*\***

The Undersigned owner seeks approval of the following:

- \_\_\_\_\_ Painting (Color chips included for House)
- \_\_\_\_\_ Additions/Alterations of Existing Structures/or Property (Including Satellite Dishes)
- \_\_\_\_\_ Prior Additions/Alterations of Existing Structure/or Property

Narrative Description in detail of Additions/Alterations (*Continue on Additional Sheet if Necessary*)

\_\_\_\_\_

\_\_\_\_\_

**MUST INCLUDE** \_\_\_\_\_ Lot Survey Showing Dimensions, Setbacks, Landscaping, Etc.  
\_\_\_\_\_ New Structure – Plans Enclosed Including Lot Survey, Landscaping Plan and Exterior Materials, Size, Colors and Location on Property & any other pertinent information.

The undersigned property owner hereby acknowledges and agrees that the undersigned shall be solely responsible for determining whether the improvements, alterations or additions described herein comply with all applicable laws, rules and regulations, code, and ordinances: including, without limitation, zoning ordinances, subdivision regulations and building codes. The Architectural Committee shall have no liability or obligation to determine whether such improvements, alterations and additions comply with any such laws, rules, regulations, codes or ordinances.

SIGNATURE OF OWNER \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

STREET ADDRESS with CITY, STATE and ZIP: \_\_\_\_\_

TELEPHONE (H) \_\_\_\_\_ (W) \_\_\_\_\_ DATE \_\_\_\_\_

PROJECT START Date: \_\_\_\_\_ PROJECT Completion Date: \_\_\_\_\_

Please note the following completion timeframe guidelines to assist you in completing the "PROJECT Completion Date" field above which is required for each project.	Swimming Pools less than 90 Days from Project Start Date
	Major Constructions less than 180 days from Project Start Date
	All Other projects less than 30 Days from project Start Date

ACTION OF COMMITTEE (To be completed by ARC Committee)

\_\_\_\_\_ RECOMMEND APPROVAL

\_\_\_\_\_ DISAPPROVED FOR THE FOLLOWING

REASON: \_\_\_\_\_

Date: \_\_\_\_\_

ARC _____	Yes ____ No ____ (Committee CHAIR )	ARC _____	Yes ____ No ____
ARC _____	Yes ____ No ____	ARC _____	Yes ____ No ____
ARC _____	Yes ____ No ____	ARC _____	Yes ____ No ____
		ARC _____	Yes ____ No _

Committee Contact is: [arch@avondalegroveshoa.com](mailto:arch@avondalegroveshoa.com)

\_\_\_\_\_ Date Received by ARC Committee

\_\_\_\_\_ Date Approval Mailed to Homeowner

**\*\*\*This request becomes invalid and a re-submission will be required if described improvements are not started prior to the completion date noted above. \*\*\***