

**Architectural Review Form
The Springs Homeowners Association**

DATE: _____

Attn: Architectural Review Committee (ARC)

The undersigned requests approval from the ARC for the following:

____ New Structure ____ Addition/Alteration to Existing Structure/Property

Description of Addition/Alteration:

Continue on the back of the page, if necessary. Include site plan drawing showing dimensions, setbacks and landscaping. Describe exterior materials, and provide examples of color.

PRINT NAME _____ SIGNATURE _____

STREET ADDRESS _____

LOT NUMBER _____ PHONE NUMBER _____

MAILING ADDRESS (if different) _____

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ACTION OF THE ARCHITECTURAL REVIEW COMMITTEE

Approve ____/Disapprove ____ for the following reasons

SIGNED _____
SIGNED _____
SIGNED _____

DATE _____
DATE _____
DATE _____

Form should be mailed to:

**Architectural Review Committee
C/O Sandra A Charbonier
14304 Eureka Place
Tampa, Florida 33613**