

FAIRWAY OAKS HOA, INC.
ARCHITECTURAL REVIEW FORM

DATE SUBMITTED: _____ LOT NO: _____

OWNERS NAME: _____ ADDRESS: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____ ALL INFORMATION MUST BE INCLUDED TO BE APPROVED

A sketch and/or description of plan: Attach a separate diagram and survey if appropriate. Submit color samples or materials:

Return completed form, sketch, survey, color samples, etc.. to: FAIRWAY OAKS HOA, Inc, PO Box 1407, Port Richey, Fl. 34673 or email it to fairwayoakshoa@myyahoo.com. A response will be emailed to you within 45 days.

IT IS THE RESPONSIBILITY OF THE HOMEOWNER TO ASSURE THAT THIS MODIFICATION COMPLIES WITH ALL COUNTY AND/OR STATE LAWS AND ZONING REGULATIONS. IF DEED RESTRICTIONS DIFFER FROM COUNTY OR STATE REGULATIONS, DEED RESTRICTIONS WILL BE THE PRIMARY ENFORCEMENT.

ANY CHANGES MADE AFTER APPROVAL MUST BE BROUGHT TO THE BOARD'S ATTENTION, IF WORK IS NOT COMPLETED OR STARTED WITHIN 30 DAYS OF APPROVAL, A NEW APPLICATION MUST BE SUBMITTED.

DATE REVIEWED: _____

THIS REQUEST ____ HAS ____ HAS NOT BEEN APPROVED.

IF NOT APPROVED, IT IS DUE TO THE FOLLOWING REASON _____

PRESIDENT'S
SIGNATURE _____

HOA'S
SIGNATURE _____