Revised 2/10/2017

Exhibit A

This application is to be completed by the homeowner and submitted to the Architectural Review Committee (ARC) for approval PRIOR TO ANY WORK BEGINNING. Please complete the form and in its entirety and give it to any member of the ARC review board.

TO BE COMPLETED BY THE HOMEOWNER

NAME				
ADDRESS PHONE (HOME)				
PHONE (HOME)	(WORK)	(0	CELL)	
WORK TO BE PREFORMED: DESCRIBE THE CHANGE, ADDITION OR INSTALLATION OF WORK (i.e. pool, enclosure, patio, landscaping, ect.)				
LOCATION OF WORK (COMPLETED DESO OR INSTALLATION IN RELATION TO THE				
SPECIFICATIONS: (ALL SPECIFICATIONS S	HOULD BE INCLUDED	ON DESCRIPTION	I, DRAWING, PLAN (DR SURVEY)
MATERIALS:				
COLOR(S) (A SAMPLE OR COLOR CHIP MUST BE PROVIDED WITH PLANS)				
ESTIMATED DATE OF COMPLETION: (All work must be completed in a reasonable time frame, and reviewed by the ARC). IT IS THE HOMEOWNERS RESPONSIBILITY TO NOTIFY ARC WHEN WORK IS COMPLETED.				
NOTE: Per the Governing Documents: OWNERS A PERSONS UNDER THEIR EMPLOY DIRECTION OR A occur or is corrected. ALL REQUESTS MUST CON OBTAINING THE NECESSARY PERMITS IF YOUR RE approval by the Sarasota County Building Depart	AUTHORITY. Please superv FORM TO LOCAL ZONING A EQUEST IS APPROVED. The	ise the work to ensur ND BUILDING REGUL	e that damage to other ATIONS AND OWNERS A	property owner's does not ARE RESPONSIBLE FOR
I hearby certify that I will construct the proposed Estates Village POA, and representations made o (ARC) and/or Woodhaven Estates Villas POA has	n the application. I unders	tand if I deviate from	the above, the Archited	tural Review Committee
Signature of Applicant		-		Date
DO NOT WRITE BELOW THIS LINE, FOR	ARC USE:			
DATE APPLICATION RECEIVED:	DATE APPROVED	D D/	ATE DENIED	
SIGNATURE OF ARC MEMBER:				
DATE WORK FINISHED:I	DATE WORK ACCEPTE	D BY ARC:		
SIGNATURE OF ARC MEMBER: (A copy will be returned to ho	meowner and anothe	r kept on file with	Woodhaven Estate	es Villas POA)