

PINE CHASE ESTATES

c/o Watson Association Management
1648 SE Port St Lucie Blvd.
Port St. Lucie, Florida 34952
Telephone: 772-871-0004

OFFICE USE ONLY:

REQ #: _____
LOT/BLDG: _____
REC'D BY: _____
DATE: _____

REQUEST FOR ARCHITECTURAL COMMITTEE REVIEW

Document Checklist

Request Form

<input type="checkbox"/> Survey/Plot Plan	Date	_____
<input type="checkbox"/> Building Plans	Mr./Mrs.	_____
<input type="checkbox"/> Elevations	Address	_____
<input type="checkbox"/> Details		_____
<input type="checkbox"/> Specifications	Phone	_____
<input type="checkbox"/> Permit	Other Address	_____
<input type="checkbox"/> Photos		_____
<input type="checkbox"/> Other	Other Phone	_____

Brief description of addition, alteration, improvement, etc.:

Contractor: _____
Address: _____
Cert. of Insurance: _____
Occupation Lic#: _____
Cert. of Competency# _____

***HOMEOWNER'S AFFIDAVIT:**

I have read the covenants of my Association and agree to abide by such covenants and restrictions. No work will be commenced without approval of my Association.

Signed _____ *Dated* _____

FOR ASSOCIATION USE ONLY:

Approved by Board of Directors Preliminary approval subject to review
 Insufficient information submitted – RESUBMIT
 Not approved (as noted)

Association Agent: _____ Date: _____