

# HERITAGE PLACE 2 PROPERTYOWNERS ASSOCIATION, INC.

## ARCHITECTURAL REVIEW COMMITTEE (ARC) APPLICATION

MAIL APPLICATION TO: 5756 S. Semoran Blvd., Orlando, 32822  
OFFICE: (407) 852-5300 Fax: 852-5301 or EMAIL: [sclaudio@houseofmgmt.com](mailto:sclaudio@houseofmgmt.com)

Name \_\_\_\_\_ Email \_\_\_\_\_

Property Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
(If different from property address)

Phone Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

In accordance with the Declaration of Covenants, Conditions and Restrictions and the Association's Rules and Regulations, installation must conform to this approval and the Association's guidelines.

### I hereby request consent to make the following changes, alterations, renovations and/or additions to my property:

Fence  Swimming Pool  Roof Replacement  Patio  screen Enclosure  Landscaping/Lawn Replacement  Other

Description of Modification (Shingle Color/Type) \_\_\_\_\_

Attach a copy of the property survey **showing** the location of the proposed change, alteration, renovation or addition. Please attach a drawing or plan of the exterior modification, shed or fence.

### EXTERIOR PAINT

Paint Manufacturer: \_\_\_\_\_ (Ex: Behr, Glidden, Porter Paints, Olympic, Sherwin Williams, etc.)

Body/Garage Door Color Name: \_\_\_\_\_ Trim Color Name: \_\_\_\_\_ Front Door Color Name: \_\_\_\_\_ Accent Color Name: \_\_\_\_\_

### I HEREBY UNDERSTAND AND AGREE TO THE FOLLOWING CONDITIONS:

1. No work will begin until written approval is received from the Association. You have 60 days from the approval date to complete the project. If not completed within 60 days you will be required to re-apply.
2. All work will be done expeditiously once commenced and will be done in a professional manner by a licensed contractor or myself.
3. All work will be performed timely and in a manner that will minimize interference and inconvenience to other residents.
4. I assume all liability and will be responsible for any and all damages to other lots and /or common area, which may result from work.
5. I will be responsible for the conduct of all persons, agents, contractors, subcontractors and employees who are connected with this work.
6. I will obtain any necessary governmental permits for the work.  
I am responsible for complying with all federal, state, and local laws, codes, regulations and requirements in connection with this work.
7. Upon receipt of application, House of Management Enterprises, Inc. will forward the Application to the Association. A decision by the ARB Committee may take up to 30 days. I will be notified in writing whether the application is approved or denied.

### ALL HOMEOWNERS ARE RESPONSIBLE FOR FOLLOWING THE RULES AND GUIDELINES OF THE ASSOCIATION WHEN MAKING EXTERIOR MODIFICATIONS.

**NOTE: APPLICATIONS SUBMITTED WITHOUT A COPY OF THE SURVEY, DRAWING OR COLOR SAMPLE WILL BE CONSIDERED INCOMPLETE. IF AN APPLICATION IS INCOMPLETE, IT WILL NOT BE PROCESSED AND WILL BE RETURNED TO YOU.**

Signature of Owner(s): \_\_\_\_\_ Date: \_\_\_\_\_

**Do Not Write Below This Line**

This Application is Hereby:  Approved  Denied Reason for Denial \_\_\_\_\_

Date Signed: \_\_\_\_\_ Committee Member Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Date Signed: \_\_\_\_\_ Committee Member Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Comments: \_\_\_\_\_

Date Received from Owner \_\_\_\_\_ Mailed to Assn \_\_\_\_\_ Mailed to Owner \_\_\_\_\_