

Garden Homes at Grove Isle — Application for Architectural Change

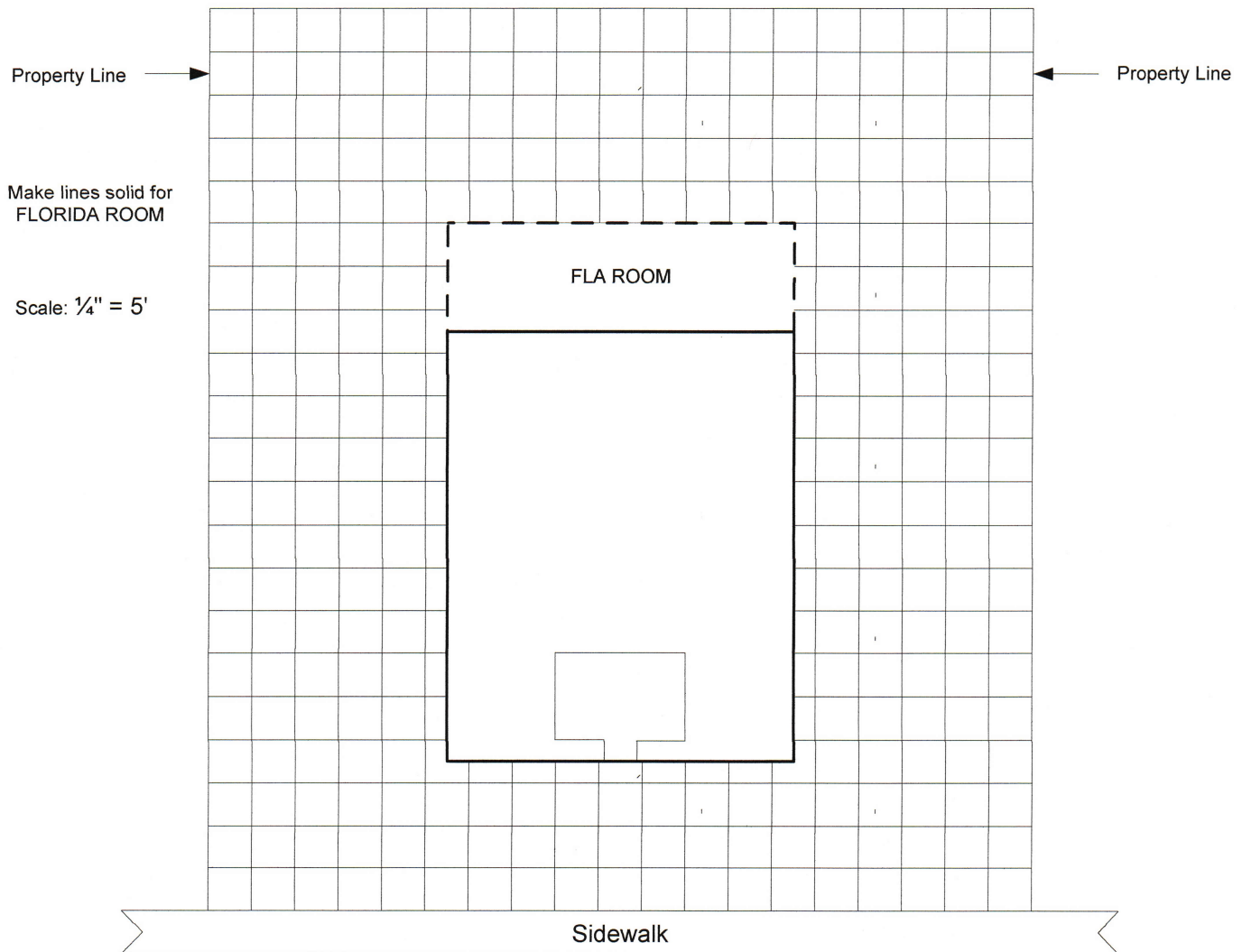
Name: _____ House #: _____ Date Submitted: _____

Date ARB request received: _____ Date HOA Board received: _____

Note: Landscape/plantings become the responsibility of the homeowner. The homeowner also agrees to notify any potential buyers of same. Homeowner will not hold the HOA or Landscape Vendor liable for any trimming or damage.

Homeowner's Signature: _____ Date: _____

Please describe in detail the requested change(s) on the chart below. You may also use page 2 of this form for additional information.



Additional Information:

ARB recommendation to Garden Homes HOA Board: Approval _____ Disapproval _____

Meets Criteria for Expedited Approval: Yes _____ No _____

ARB Chair Signature: _____ Date: _____

HOA Board Decision: Approved _____ Disapproved _____

HOA Board Signature: _____ Date: _____

HOA Board Signature: _____ Date: _____

Date Homeowner Notified: _____