

Community Name: _____
A Deed Restricted Community

ARCHITECTURAL REVIEW COMMITTEE SUBMISSION FORM

Any modifications to your property must be submitted to the Architectural Review Committee for approval *PRIOR* to any work or modifications being constructed on your property. Please allow two to four weeks for complete processing. Include complete descriptions, dimension, style, type drawings, materials being used, colors, etc. The more information you can provide will help to expedite your application. **Please attach a copy of final boundary survey showing the location of improvement in relation to other structures and having lot lines marked. Survey should be marked with x's plotting the location of fences.**

Date Submitted _____ Phone # _____ Fax # _____

Owner _____ E-mail: _____

Property Address _____ City _____ Zip _____

Lot # _____ Unit # _____ County _____

Mailing Address if different from above: _____

LAKEFRONT LOT: Yes or No

CORNER LOT: Yes or No

Contractor _____ Phone # _____ Fax # _____

ITEMS FOR REVIEW

_____ Building Elevations
_____ Color Selections
_____ Doors
_____ Drainage Plan
_____ Fence
_____ Floor Plan

_____ Landscape Plan
_____ Mail Box
_____ Structural Addition
_____ Swimming Pool
_____ Windows
_____ Shed

Other: _____

Homeowner Comments – Attach or state specific material list, color samples, picture or rendering.

Homeowner is responsible for compliance with all applicable city ordinances and permits if application is approved.

FOR OFFICE USE ONLY		
DATE RECEIVED	DATE APPROVED	DATE DENIED
DATE OF LETTER	DATE OF SIGNATURE	DATE MAILED

Return to:

BCM Services, Inc., 920 Third St., Suite B, Neptune Beach, FL 32266
Phone: (904) 242-0666 Fax: (904) 242-0670 arc@bcmsservices.net