
ARB/DRC Design Application for Exterior Modifications
Single Family Home/Villa (only)

Owner Name _____

Address/Lot _____

Phone _____

Email _____

Neighborhood _____

Association _____

NOTE: ARB/DRC approval must be received prior to beginning any work. Owners are encouraged to review their Neighborhood Association's Restrictions and Master Design and Development Guidelines prior to considering exterior modifications or landscape changes.

Return completed form to the appropriate management company representative:

▪ Esperanza I, II	info@precedentmgt.com	727-573-9300
▪ Esperanza III	zgrubb@kwpmc.com	239-454-1101
▪ Esperanza IV	scarlettmilano@alliantproperty.com	239-454-1101
▪ Provencia	tosh@compassrosemanagement.com	239-309-0622

ARB/DRC APPLICATION INSTRUCTIONS:

- All applications must be submitted in writing using this Design Application form. Only one request per project.
- Attach detailed scope of work including but not limited to:
 - Photos of existing area for review
 - Detailed measurements, and a drawing/sketch that identifies location and details of the proposed modification
 - List of products, including color schemes
 - In the case of landscape alterations, provide specific plantings that accurately show the changes you are requesting
 - Any descriptive materials that may support or explain your request, ie proposals, etc.
 - If vendors are hired, please include the following *current* document:
 - a) State license
- An inspection of the alteration may be performed by the ARB/DRC to ensure the alteration was completed in accordance with the approval.

All ARB/DRC requests will be reviewed within 30 days of complete submission. If any additional information is needed you will be contacted for those items. If you have questions regarding the approval process, please contact the appropriate management company noted above.

Type of change or modification requested (Check all that apply to this project.)

<input type="checkbox"/>	Additions/Exterior Structure Change*	<input type="checkbox"/>	Drainage	<input type="checkbox"/>	Landscape/Trees/Shrub Expansion
<input type="checkbox"/>	Additional Central Air Conditioner	<input checked="" type="checkbox"/>	Driveway/Walkway/Ramp/Landing*	<input type="checkbox"/>	Pool Cage or Screen Enclosure
<input type="checkbox"/>	Antennae Satellite Dish	<input type="checkbox"/>	Exterior Landscape Lighting	<input checked="" type="checkbox"/>	Pool/Spa Installation*
<input checked="" type="checkbox"/>	Deck, Lanai Ext, or Patios*	<input checked="" type="checkbox"/>	Garage door modification*	<input checked="" type="checkbox"/>	Roof*
<input type="checkbox"/>	Door or Window Modification	<input type="checkbox"/>	Generators/Propane Tank	<input type="checkbox"/>	Solar Panels
<input checked="" type="checkbox"/>	Door or Window Replacement*	<input type="checkbox"/>	House Paint (exterior)	<input type="checkbox"/>	Trailers, Dumpsters, Pods
<input type="checkbox"/>	Door - Interior security or screen	<input type="checkbox"/>	Hurricane Shutters or Windows	<input type="checkbox"/>	Other

***REQUIRE DRC APPROVAL**

DESCRIPTION

NOTE: The homeowner is responsible for compliance of contractors to abide by the Master Association Rules and obtain appropriate City/County permits. Also, the homeowner shall remain solely liable for all additions, changes or the like which they make to their property including those contained in this approval.

I/We hereby certify that this work will be performed in accordance with all applicable governing state and local codes and regulations; and in accordance with all Paseo Master Association, and Neighborhood Association Bylaws and any Restrictions, Rules, and Regulations. By signing this form I/we agree not to commence work on the above requested modification until approve in writing by the ARB/DRC. Furthermore, I/we understand that the ARB/DRC has up to 30 days to approve or deny my request from the date it receives this application and all required supporting documentation.

Owner Signature: _____

Co-Owner Signature: _____

Date: _____

This application is complete.

(CAM signature/date required) _____