

THE LINKS at Santa Rita Springs

Date Submitted: _____

Date Received: _____

ARCHITECTURAL CHANGE, LANDSCAPE or ADDITION REQUEST FORM

Property Owner: _____

Phone: _____

Address: _____

Lot # _____

E-Mail: _____

My signature verifies that I have read and will comply with the ARC Guidelines.

Owner's Signature(s) : _____

Details of Application: _____

Two Sets of plans (and/or color samples, where applicable) are required with each application.

ARC Action Date: _____

Approved By: _____ Print Name: _____
Disapproved By: _____ Print Name: _____

ARC Comments:

Project Completion Date: _____ **ARC Verification:** _____

***Note:**

- 1) *In the event there are changes/modifications to the originally submitted and approved request, contact ARC prior to proceeding.*
- 2) *Please advise ARC when project is complete.*
- 3) *Applications will be approved or denied in writing within thirty (30) days.*