

**KINGMAN ACRES CONDOMINIUM, VILLAGE IIA**

**ARCHITECTURAL REVIEW COMMITTEE**

DATE: \_\_\_\_\_  
NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

**I AM REQUESTING THE FOLLOWING (this list is not intended to be inclusive of all possible home and property alterations):**

- |                   |                                    |                                |
|-------------------|------------------------------------|--------------------------------|
| _____ ADDITION    | _____ LANDSCAPING (INSTALL/REMOVE) | _____ INSTALL FRONT DOOR       |
| _____ ALTERATION  | _____ INSTALL SATELLITE DISH       | _____ INSTALL SCREEN ENCLOSURE |
| _____ IMPROVEMENT | _____ INSTALL FLOWERBED EDGING     | _____ INSTALL PATHWAY          |
| _____ DECORATION  | _____ PAINTING (HOUSE/DRIVEWAY)    | _____ WIDEN DRIVEWAY           |
| _____ OTHER       |                                    |                                |

\_\_\_\_\_ TREE (INSTALL/REMOVE) *Any tree removed must be replaced by an approved replacement tree within 45 days.*

\_\_\_\_\_ INSTALL POOL/SPA *Must supply plans and drawings of pool and enclosure/fencing, permit, \$1,000 deposit (to cover any damages) to be returned after final inspection by the Board of Directors.*

\_\_\_\_\_ INSTALL FENCE *Must be green vinyl, 4 ft chain link. Must be placed inside property line per City of PSL Code. Must supply permit, plans and drawings including survey, property line and fence line measurements and gates placement.*

**Please give a DETAILED description of what you are requesting. YOUR DESCRIPTION SHOULD INCLUDE PLANS if possible showing size, color, height, location, etc. (attach additional sheets if necessary).** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HOMEOWNER'S AFFIDAVIT**

**I have read the covenants of my Association and agree to abide by such covenants and restrictions. No work will be commenced without approval of my Association.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR ASSOCIATION USE ONLY**

_____ Approved	Notes: _____
_____ Approved with Conditions (see notes)	_____
_____ Not Approved	_____
_____ Resubmission needed (see notes)	_____

**AUTHORIZED SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_