

**ARCHITECTURAL CONTROL COMMITTEE  
REQUEST FOR APPROVAL FORM  
CALLAWAY PLACE HOA**

DATE \_\_\_\_\_  
OWNERS \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_  
WHAT IS THIS: \_\_\_\_\_ NEW STRUCTURE \_\_\_\_\_  
\_\_\_\_\_ ADDITION  
\_\_\_\_\_ NEW ROOF  
\_\_\_\_\_ PAINT  
\_\_\_\_\_ LANDSCAPE CHANGE  
\_\_\_\_\_ OTHER

Please give DETAILED description of what you are requesting. YOUR DESCRIPTION SHOULD INCLUDE EXACT SIZE, COLOR, (SUBMIT SAMPLES), HEIGHT, AND LOCATION.

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

**HOMEOWNER AFFIDAVIT**

I have read the covenants of the Callaway Place Homeowners Association and agree to abide by such covenants and restrictions. No work will commence without approval of the Association.

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

Send to: Watson Association Management  
430 NW Lake Whitney Place  
Port St. Lucie, FL 34986  
hrothmel@watsonrealtycorp.com

**FOR ASSOCIATION USE ONLY**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Approved  
\_\_\_\_\_ Approved with conditions  
\_\_\_\_\_ Not Approved  
\_\_\_\_\_ Re-Submittal Needed. Insufficient Information Submitted