

Diamond Cove Homeowners Association - Architectural Review Board (ARB)
APPLICATION FOR PERMIT FOR ALL EXTERIOR ALTERATIONS - Rev. 0309

Send to: COMMUNITY MANAGEMENT PROFESSIONALS INC.
c/o Cheryl Altemose, 5401 S Kirkman Rd., Suite 450 Orlando, FL 32819
Phone: 407/903-9969 ext. 122; Fax: 407-903-9234; email: cheryl@community-mgmt.com

DIRECTIONS: Expect up to 30 days for a decision. You should verify that the management company has received your application by calling the property manager above. A failure to respond to your application is not an implied approval. The ARB standards and this application are on the diamondcovehoa.com website.

This application must be submitted to the ARB and **APPROVED IN WRITING BEFORE** any work is started anywhere on the exterior of your property. No verbal approvals are valid. If there will be any disturbance or intrusion into or over the conservation area, a permit must be obtained from the Orange County Environmental Protection division (phone: 407-836-1400).

ALL GOVERNMENTAL PERMITS MUST BE OBTAINED AND COMPLIED WITH BEFORE AND AFTER ANY WORK IS STARTED FOR THIS PERMIT TO BE VALID.

Name: _____ Date: _____
Address: _____ Phone Number: () _____ (H)
_____ Phone/Fax Number: () _____ (W)
Lot number _____ Email Address: _____

1. Description of the alteration or change: _____

If you are re-painting your house, attach your paint maker color samples and identify the matching color in the Diamond Cove HOA approved Color Wheel color book (available from the Property Manager) and on what surface it will be applied (body, trim and door). It is far easier if you select an existing Color Wheel color and not substitute with an approximate match, because it may not be approved.

- Your color names, numbers, manufacturer and surface: _____

- Matching Diamond Cove Color Wheel color name, number and surface: _____

2. Specifications: For other than painting, attach site plan, drawings or photos of proposed alterations

Location: _____

Dimensions: _____ Materials: _____

Attach a copy of your property survey, with property lines, showing the location of change:

3. Work to be done by: Self _____ Other _____ Contractor Name: _____

Phone Number: _____ Licensed/Insured?: _____ Approximate Cost \$ _____

4. Projected Start Date: _____ Project Completion Date: _____

.....

Date received: _____ Date Reviewed: _____ Approved: Yes ___ No ___ Conditions: _____

