**Venetian Village Community Association**

**C/O Sandcastle Property Management**

**APPLICATION FOR ARB APPROVAL**

Owners desiring to make changes to the exterior of their house, or it’s associated landscape must obtain approval from the Association’s Architectural Review Board **PRIOR** to making those changes. Projects that require permits from government agencies should obtain ARB approval prior to applying for those permits. However, no work shall commence until ARB approval and any required permits have been obtained.

Completed forms must be mailed to Venetian Village Community Association, c/o Sandcastle Property Management, 16266 San Carlos Blvd. Suite 10, Fort Myers, FL 33908 or email to Matt@sandcastlepmb.com.

The following applicant information is required. Incomplete forms will not be accepted.

**Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

In accordance with the Neighborhood Declaration and the Master Declaration, the undersigned homeowner requests authorization to make the modifications or alterations described below, to the Dwelling/Lot listed above.

**-Description of Work-**

Describe the work to be done and provide the descriptive materials/forms that will aid in the approval process. This includes sketches or drawings, material descriptions, paint color chips and/or landscape drawings. Please include a copy of the contractor’s license and certificate of insurance naming the Association as additionally insured. If more room is needed, please attach additional sheets to this form.

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**I (WE) AGREE THAT THE DECISION OF THE ARB ON THIS MATTER IS FINAL, AND AGREE TO ABIDE BY SAID DECISION.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Home Owner’s Signature Date

*This section is for ARB Use Only*

Control No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Decision Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Be it known to all persons, the described herein HAS / HAS NOT** *(circle as applicable)* **been approved by the Venetian Village ARB.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ARB Signatures**