Crimson Pointe Homeowners' Association, Inc

Application for Architectural Review Committee Submit Request to the online portal or to NFI Property Management Solutions LLC, 7139 N. 9th Ave., Suite P, Pensacola, FL 32504 Phone (850) 484-2684 Fax: (850) 474-3551 Email: compliance@nfipms.com

Owner please be aware that you are responsible for obtaining any required permitting, observing all easements and setbacks and adhering to any local, state and federal laws. Also, if permits and inspections are required, please provide proof of passed inspection upon completion of project.

Property Address	Application Date
Owners Name	Telephone
Mailing Address (if different)	
Email:	
Exterior Change Request:	
	(Attach additional sheet if necessary.)

Describe, in detail, the exterior change requested. You will need to complete this form along with location information, preferably on a copy of your survey, details for the project, dimensions, height and materials, brochure or picture, and colors and return to our office. APPLICATION'S CANNOT BE SUBMITTED TO THE ARC WITHOUT ALL OF THE ABOVE REQUIRED INFORMATION.

THE ARC HAS EXCLUSIVE CONTROL OVER THE DECISIONS ON ALL REQUESTS (SEE YOUR CC&R'S). THE MANAGEMENT COMPANY RECEIVES THE INFORMATION AND SUBMITS IT TO THE COMMITTEE ON BEHALF OF THE OWNER, AFTER REVIEW, WE NOTIFY THE OWNER OF THAT DECISION. THE MANAGEMENT COMPANY HAS NO INPUT IN THE DECISION MAKING PROCESS.

Estimated Start Date ______ Estimated Completion Date _____

Please refer to your covenants and restrictions for guidelines on what is and is not permitted in Crimson Pointe Homeowners' Association, Inc. You will be notified in writing of the decision of the committee. YOU MUST HAVE WRITTEN APPROVAL BEFORE COMMENCING ANY PROJECT. By approving this request, the association is not assuming any responsibility for the safety, construction, operation, maintenance, accident, injury, or claim that may arise from the change in the property.

If required, have you applied for the proper permits from all government agencies? YES / NO

I understand that approval does not relieve me of the responsibility for obtaining any and all necessary Building Permits, Variances, and/or observing all local zoning ordinances, setbacks and adhering to any local, state and federal laws. <u>Also, if permits and inspections are required, please provide proof of passed inspections upon completion of project</u>. If approved by the association, I agree to make the changes exactly as stated under the terms, conditions and specifications as described in the approval. All improvements must be on my property or property lines. If any portion of the Associations property is disturbed or damaged by either myself, or my contractor, I agree to be responsible for and to restore the common elements to their original condition.

Signature of Applicant:		Date		
Date Received To be completed by Architectu	Received By ral Review Committee:	Date Processed	Date Mailed	_
Approved Disa Signatures of Architectural Con		nal Approval:		