

ARCHITECTURAL CONTROL COMMITTEE (ACC)

FORM FOR ALL CHANGES AND ALTERATIONS THAT REQUIRE ACC  
APPROVAL ( SEE NOTE 7 ON PAGE 2)

DATE: \_\_\_\_\_ NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE #'s \_\_\_\_\_

\_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

\*REQUEST: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MEMBER

SIGNATURE \_\_\_\_\_

FOR APPLICATION INSTRUCTIONS - SEE PAGE 2

revised 05/19/15 PAGE 1 OF 2

**APPLICATION INSTRUCTIONS**

(1) ALL REQUESTS FOR ARCHITECTURAL CHANGE MUST BE MADE ON THIS FORM

(2) THE WORK REQUESTED MUST MEET THE ACC STANDARDS DEFINED IN THE **TREETOPS ASSOCIATION** DECLARATIONS & COVENANTS, ARTICLE X & "THE AMMENDED & RESTATED ARCHITECTURAL REQUIREMENTS."

(3) ALL REQUESTS MUST SPECIFY THE ADDRESS OF THE PROPERTY WHERE THE REQUESTED CHANGES ARE TO BE MADE.

(4) PLEASE PROVIDE ANY ATTACHMENTS, SUCH AS,SKETCHES,PICTURES AND/OR SAMPLES THAT YOU REQUIRE TO CLEARLY DEFINE THE REQUESTED WORK. THIS WILL EXPEDITE THE PERMITTING PROCESS.

(5) ON PAGE 2 OF THIS FORM PLEASE LIST & NAME ALL ATTACHMENTS THAT FORM PART OF THIS SUBMISSION, AND STAPLE THEM TO IT.

(6) ALL REQUESTS, INCLUDING ALL ATTACHMENTS THERETO, MUST BE SIGNED & DATED BY THE MEMBER REQUESTING THE WORK.

(7) COMPLETED REQUESTS ARE TO BE SUBMITTED TO:-

Pamela Sizemore, C/O STAR HOSPITALITY MGT., 26530 MALLARD WAY, PUNTA GORDA,FL. 33950 'PHONE #(941) 575-6764 fax 941-575-7968 or email [p.sizemore@starhospitalitymanagement.com](mailto:p.sizemore@starhospitalitymanagement.com)

**LIST OF ATTACHMENTS :-**, (FOR EXAMPLE) :- (1) DESIGN OF SHUTTER (STYLE ,MATERIAL, SIZE, METHOD OF ATTACHMENT) (2) SHUTTER COLOR SAMPLE 3) NUMBER OF SHUTTERS & LOCATIONS (4) WORK TO BE DONE BY — (5) ETC

**NOTE :-** APPROVAL OF THE REQUESTED WORK BY THE HOA DOES NOT RELIEVE THE REQUESTING MEMBER OF THE RESPONSIBILITY TO ACQUIRE ALL APPLICABLE PERMITS FROM **CHARLOTTE COUNTY** .