

3900 Woodlake Blvd., Suite 309, Lake Worth, FL 33463 Ph: (561) 641-8554 / Fx: (561) 641-9448

ATLANTIC GROVE TOWNHOME ASSOCIATION, INC. ARCHITECTURAL APPLICATION

	owner Name(s):		
Address:		Lot No.:	
Contac	t Telephone No.:	Alternate Number:	
Descril	oe in detail the changes and/or mo	difications in which you are seeking approval:	
Please	complete and sign this form and	attach the following applicable information submitted by owner	
only:			
1.	Copy of contractor proposal and	sketch of work to be done.	
2.	Copy of contractor's occupationa	l license.	
3.		rance and workman's compensation insurance; certificate holder and licate Atlantic Grove Townhome Association.	
4.	Copy of homeowner's property s	urvey indicating location of changes or modifications.	
5.	Copy of Approved Delray Beach	City Permit with permit number showing.	
6.	Copy of City permit when submit Signed off city permit when com	ting application. No application will be approved without permit. pleted.	
Materi	als you <u>may</u> need to provide to the	Association for the approval of the requested changes/modifications.	
		materials displaying the items you are requesting for installation.	
2.	A sample of the type and texture	of any building materials that may be used on the house exterior.	
	•	other materials that may be used on the house exterior.	
	•	on that may assist in Association evaluation of the project.	
5.	A site plan showing your lot, the	ocation of your home on the lot, and where the changes will be made.	
It is un	derstood that the changes or mod	lifications which you are requesting may not:	
1.	Interfere with or obstruct any ea	sements on your property or the adjoining property.	
2.	Cause a nuisance or interference	with the peace or privacy of the other people in the community.	
3.	Be performed by unlicensed coagencies.	ontractors or without the required permits from all governmental	
4.	 Upon approval of your Architectural Application, the work must commence within forty-five (45) days and be completed in a reasonable amount of time. Failure to start the work in the forty-five (45) day period will require your submitting a new application. 		
Home	owner(s) Signature:	Date:	
	Approved	Conditionally ApprovedDisapproved	

Date_____

Authorized Signature:

You will be notified within thirty (30) days of Architectural Review Board approval or disapproval of your request for changes or modifications. You will be required to accept the responsibility of maintaining any landscape changes you make.



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ASSOCIATION: ATLANTIC GROVE TOWNHOME ASSOCIATION			
RE: CODES			
Please be advised this ARC approval is subject to County/City Codes, setbacks, and permit conditions required. If at a later point it is found you have not complied with these procedures, you, the Homeowner(s), will be held responsible for any and all changes that would be required.			
Windows and door replacement must comply with The Historic Board requirements.			
Homeowner Signature:	Date:		
Homeowner Signature:	Date:		