

Oak Hollow Mahogany Run Neighborhood Association, Inc.

ARCHITECTURAL REVIEW COMMITTEE NEIGHBORHOOD (ARC-N) REQUEST FOR MODIFICATION

I, _____, hereby request approval by the Architectural Review Committee-N on (Date) _____ for the modification shown below to Unit/Lot at (Street Address) _____.

Modification:

Roof: Manuf. _____ Tile Style _____ Tile Color _____

Paint: Body _____ Bands/Trim _____ Eaves _____

Front Door _____ Garage Door _____

Other

Modifications: _____

Upon approval of my request, I/We will assume all liability for any damage incurred as a result of this modification, as well as any additional maintenance costs that may be incurred. I/We also agree to obtain any permits that may be required by any and all governmental agencies for this modification.

Each request must include:

1. OHMR ARC Application Instructions and Checklist

2. All required information listed in the Checklist for the type(s) of work included in your request. Every request requires color photographs showing the full front of your house and areas of work, and a Certificate of Insurance and license for each contractor performing work.

Return this form and all other required information to the address below.

Owner's Signature: _____ Date: _____

Email Address: _____ Phone: _____

Return completed form, by mail, to: (or e-mail to Property Manager at Oak Hollow & Mahogany Run Neighborhood Association, Inc. c/o

Manager: Coleen Linzy, CAM 9150 Galeria Court, Suite #201, Naples, FL 34109

Email: ColleenL@sandcastlecm.com Phone: (239) 596-7200, Ext:230 Website: www.SandcastleCM.com

ARC-N Meeting Date: _____

The request for the modification to Unit/Lot # has been:

() Approved

() Disapproved

() Approved with the following conditions