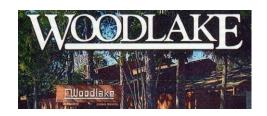


Architectural Control Request Form

This form has been prepared to allow you to request approval from the Architectural Committee for any changes to the exterior of your home including but not limited to landscaping changes, additional structures, porches, decks/patios, doors/windows and sidewalks/driveways.

First Name:

Last Name:					
Address:					
Unit Number:					
City:					
State:					
Zip Code:					
Email Address:					
Phone (home):					
Phone (cell):					
Description of Change(s): Attach additional page(s) if needed					
<u> </u>					



Note: Remember to attach any drawings, specifications or copies of permits needed to approve this request. Please review all the related documents for more information on what is required to successfully complete an Architectural Control Request. All forms must be completed in entirety and all required information included with each request before they may be approved.

Signed By:		Date:	
	Signature	-	

Please send to:

Ameri-Tech Community Management, Inc.

Address:

24701 US Highway 19 North Suite 102 Clearwater, FL 33763

Contact:

T.C. Sayles

Phone: 727-726-8000 Ext. 273

Fax: 727-723-1101

Email: tcsayles@ameritechmail.com