## TURTLE ROCK COMMUNITY ASSOCIATION, INC.

8500 Turtle Rock Blvd., Sarasota, FL 34238

OFFICE: 941-921-3865 E-MAIL: communitymanager@myturtlerock.com

## REQUEST FOR ARCHITECTURAL REVIEW COMMITTEE (ARC) PAINTING APPROVAL

The undersigned homeowner seeks approval of the ARC to paint the following:

		GARAGE DOOR:	GARAGE DOOR:FASCIA, GUTTERS:	
		FASCIA, GUTTERS:		
FRONT DO	OR:	OTHER:		
(Initials)		cturer's paint chips (reproductions not accepted) for <u>all</u> colors above o identify the area to be painted.		
	I have painted one square	e foot samples of <u>all</u> colors above on	my home for ARC review.	
(Initials)		noticeably different from the homes a	djacent to or directly across the street from	
(Initials)	mine. TE: INCOMPLETE R	FAHFSTS WILL RE RETHI	RNED WITHOUT CONSIDERAT	
	WORK MAY I	NOT BEGIN WITHOUT PR	OR ARC APPROVAL	
	y be imposed for work start	ed prior to approval. It is the owner	's responsibility to notify ARC upon comple	
Name of Appli	y be imposed for work start	Signature		
Name of Appli	y be imposed for work starte	Signature Telephone#	s responsibility to notify ARC upon comple  Date	
Name of Appli Address E-Mail Addres	y be imposed for work started	Signature Telephone#  Contractor (if applicab	Date	
Name of Appli Address E-Mail Addres	y be imposed for work started	Signature Telephone# Contractor (if applicab	Date	
Name of Appli Address E-Mail Addres	y be imposed for work started  cant (print)  ss  ********************************	Signature Telephone#  Contractor (if applicab	Date	
Name of Appli Address E-Mail Addres ************* APPROVEI	y be imposed for work started icant (print) iss *********** DECISION OF DDENIED	Signature  Telephone#  Contractor (if applicab  THE ARCHITECTURAL RI  TABLEDFINA	Date	
Name of Appli Address E-Mail Addres ************* APPROVEI	y be imposed for work started  icant (print)  ss  *******  DECISION OF  DENIED  Vork to be completed wi	Signature  Telephone#  Contractor (if applicabete et	Date  Date  Complete  Date	
Name of Appli Address E-Mail Addres ********** APPROVEI	y be imposed for work started  icant (print)  ss  *******  DECISION OF  DENIED  Vork to be completed wi	Signature  Telephone#  Contractor (if applicabete territoria)  THE ARCHITECTURAL RITABLEDFINA  ithin(3) months  Date of the owner of the o	Date  EVIEW COMMITTEE:  AL APPROVAL	
Name of Appli Address  E-Mail Addres **********  APPROVEI  Chairperson, PRIOR APPROV	y be imposed for work started  icant (print)  ss  ******  DECISION OF  DENIED  Vork to be completed wi  TURTLE ROCK ARC  AL IF REQUIRED:	Signature  Telephone#  Contractor (if applicab  THE ARCHITECTURAL R  TABLEDFINA  ithin(3) months  Date	Date  Date  Complete  Date  Da	
Name of Appli Address  E-Mail Addres **********  APPROVEI  Chairperson, PRIOR APPROV	y be imposed for work started  icant (print)  SS  *******  DECISION OF  DENIED  Vork to be completed wi	Signature  Telephone#  Contractor (if applicab  THE ARCHITECTURAL R  TABLEDFINA  ithin(3) months  Date	Date  Date  Complete  Date	