

PABLO BAY HOA INC.

A Deed Restricted Community

ARCHITECTURAL REVIEW COMMITTEE SUBMISSION FORM

Any external modifications to your property must be submitted to the Architectural Review Committee for approval **PRIOR** to any work or modifications being constructed on your property. Please allow two to four weeks for complete processing. Include complete descriptions, dimension, style, type drawings, materials being used, colors, etc. The more information you can provide will help to expedite your application. **Please attach a copy of final boundary survey showing the location of improvement in relation to other structures and having lot boundaries and building restrictions lines (BRL) marked. Survey should be marked with x's plotting the location of fences.**

Date Submitted: ___ / ___ / ___ Email(print): _____

Owner Name (print): _____ LOT # _____ County: Duval

Property Address _____ City: Jacksonville Zip _____

Address if different from above: _____

LAKEFRONT LOT: Yes or No **CORNER LOT:** Yes or No, Contractor Name _____

Projected Start Date ___ / ___ / ___ Projected completion ___ / ___ / ___ Contractor Phone # _____

All Approved projects are to be started within 30 days of projected start date and are to be finished within 30 days of projected completion date. If project is not completed within 30 days of projected completion date, homeowner must inform the ARB in writing within 7 days of the projected completion date, the reason for delay and the new completion date.

ITEMS FOR REVIEW (mark all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Building Elevations | <input type="checkbox"/> Fence | <input type="checkbox"/> Solar panels |
| <input type="checkbox"/> Color Selections | <input type="checkbox"/> Floor Plan | <input type="checkbox"/> Structural Additions |
| <input type="checkbox"/> Doors (include picture of house color) | <input type="checkbox"/> Landscape Plan (includes tree removal) | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> Drainage Plan | <input type="checkbox"/> Mailbox | <input type="checkbox"/> Windows |
| <input type="checkbox"/> Driveway (include picture of house color) | <input type="checkbox"/> Roof (include picture of house color) | <input type="checkbox"/> Other |
- Tree Removal (Include completed Tree Removal Request Form)

Homeowner Comments – Attach or state specific material list, color samples, picture or rendering.

The undersigned hereby certifies that the proposed modifications complies with all applicable: 1) requirements of the Declaration of Covenants, Conditions, Restrictions and Easements for Pablo Bay, 2) architectural guidelines/standards, 3) county/city ordinances, and 4) provisions of the Planned Unit Development zoning ordinances for Pablo Bay.

Owner signature (date) _____ Joint Owner signature (dated) _____

Name Printed _____ Name Printed _____

FOR OFFICE USE ONLY

DATE RECEIVED	DATE APPROVED	DATE DENIED
DATE OF LETTER	DATE OF SIGNATURE	DATE MAILED

TPAM PHONE (850) 583-1173

Return to: TPAM 100, State Road 13 N, Suite-D, Jacksonville FL 32259

Version 4/07/21

Email: customerservice@tpam.biz