

Greystone Community Association, Inc.

Architectural Review Request

Name: _____ Date Submitted: _____
Address: _____ LOT #: _____
Phone# (Daytime) _____ (Evening) _____
Contractor's Name _____ Phone#: _____

I request approval for the changes in the exterior appearance of my property listed below. I understand that work may not begin until these changes have been approved. I further understand that once started the changes must be completed in a reasonable time and that the acquisition of all building permits and licenses is my responsibility.

Owner's Signature: _____ Date: _____

Note: All requests must include drawings, plans, Lot survey and samples complete enough for those on Architectural Review to render a decision. An incomplete submission may result in delay or rejection of your request.

Please indicate type of change:

- ____ Screen Room or Pool Enclosure
- ____ Patio or Deck
- ____ Enclosing a screen room
- ____ Addition/Shed/Outbuilding
- ____ Pool/Hot Tub/Jacuzzi
- ____ Fencing/Wall/Retaining Wall
- ____ Play Structure/Tree House
- ____ Paint House/Doors (Color Sample/Manufacturer/Name/Number)
- ____ Re-Roof House (Manufacturer/Color Sample)
- ____ Substantial Changes in Landscaping
- ____ Other Items: _____

Please describe in detail your requested change or attach proposal:

Committee Action: Approved: _____ Approved with Notes: _____ Resubmit Other Items: _____

NOTES: _____

Disapproved _____

NOTES: _____

Architectural Review Coordinator Signature: _____ Date: _____

MAIL TO: Guardian Association Management, 10,000 SW 52 Avenue
The Links Clubhouse, Gainesville, FL 32608
FAX TO: 352-562-7453 OR EMAIL TO: TEaton@GainesvilleGAM.com
FOR MORE INFORMATION CALL: 352-353-4802