

LAKE DEXTER WOODS HOMEOWNER'S ASSOCIATION INC.
P.O. BOX 1405
WINTER HAVEN, FL 33882-1405

Date: _____

Name: _____

Address: _____

Phone #: _____

ARTICLE V, ARCHITECTURAL CONTROL:

No building, fence, wall or other structures shall be commenced, erected or maintained upon the properties, nor shall any exterior addition to, change, alteration, or repair (other than repairs restoring the exterior of any building located upon the property to its original appearance and color) therein be made until the plans and specifications showing the nature, kind, shape, height, color, materials and location of the same shall have been SUBMITTED AND APPROVED IN WRITING as to harmony of external design and location in relation to surrounding structures and topography by the board of directors of the association or by the Architectural Control committee, composed of three (3) or more representatives appointed by the board. In the event said board, or its designated committee, fails to approve or disapprove such design and locations within (30) days after said plans and specifications have been submitted to it, approval will not be required, and this article will be deemed to have complied with.

I hereby request the Lake Dexter Woods Homeowner's Association, Architectural Control committee and the board of directors to approve the following improvements to my property:

Please be advised that if you are constructing a fence, it must be natural wood, composite and/or white vinyl materials only. If you are changing the exterior color of your house, you must submit a sample of the new colors you are planning to use. If you are planning to erect a fence or building, you must submit a map showing the location and dimensions of the building or layout of the fence.

(OVER)

I have obtained signatures of neighbors that have a view of the above requested improvement. The people signing below are indication they have no objection to the above requested improvement.
(This is optional)

Name: _____


Address: _____

Name: _____

Address: _____


Name: _____

Address: _____

 **Homeowner's signature:** _____

****NOTE:** The board meets once a month. As per Article V, the board has thirty (30) days to reply to your request.

As per our restrictive covenants, **failure to obtain prior approval from the Architectural Control committee can result in removal of structures or restoration back to an original color all at the homeowner's expense.**

 **Estimated Completion Date:** _____

Approved: _____ Date: _____

_____ Date: _____

Disapproved: _____ Date: _____

_____ Date: _____

APPROVAL DOES NOT PRECLUDE ANY POLK COUNTY PERMITS NECESSARY.