

**Community of Emerald Bay Homeowner's Association, Inc.**

Architectural Review Committee Application

Date:

Owner Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Property Address: \_\_\_\_\_, Palm Harbor, FL 34684

Mailing address (if different) than property: \_\_\_\_\_

Brief description of addition, alteration, or improvement to be completed (continue on back if necessary):

Please provide the following documentation if applicable to your improvement(s):

**Home additions such as rooms, patios, etc:** Survey/Plot plan, Building Plans, Details

**Exterior painting or alteration:** Color samples and/or material specifications

**Fences:** Survey/Plot Plan outlining area where fence is to be repaired / replaced. Include detailed description of fence being used, type of fence, material and color.

Estimated Start Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_

**HOMEOWNERS AFFIDAVIT**

I hereby submit the above and/or attached plans for changes / alterations / improvements for review by the Architectural Review Committee (ARC). I understand that the ARC will respond in writing within 30 days of receipt of this application with approval/denial or request for more information. I have read the covenants and restrictions of Community of Emerald Bay HOA, Inc. and agree to abide by such covenants and restrictions. No work will be commenced without the approval of Community of Emerald Bay HOA, Inc.

Signed: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

**ARC Contact Info:**  
Ameri-Tech Community Management  
Mail to office or email to:  
[jmateka@ameritechmail.com](mailto:jmateka@ameritechmail.com)

**Mgmt. Contact info:** Jim Mateka, 727-726-8000 Ext 269  
Ameri-Tech Community Management  
24701 US 19 North, Suite 102  
Clearwater, FL 33763

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**Homeowner, please do not write below this line (for ARC use only)**

- ( ) Approved by Architectural Review Committee. (Approval good for one year)
- ( ) Preliminary approval subject to review of Board of Directors
- ( ) Insufficient information submitted. Please see note below.
- ( ) Not approved. Please see note below.

Note:

**ASSOCIATION NEITHER RESPONSIBLE NOR LIABLE FOR ANY REQUIRED PER IITS ARC**

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_