

**Phoebe Park Homeowners Association, Inc.**

c/o Vanguard Management Group  
10500 University Center Dr. Suite 190, Tampa, FL 33612 (813) 955-5887  
Fax# 813-993-0142 or email form to [frontdesk@vanguardmanagementgroup.com](mailto:frontdesk@vanguardmanagementgroup.com)

DATE: \_\_\_\_\_ Is this application a re-submittal of a previous application? Yes or No

The undersigned owner seeks approval of the ARC Committee as follows (circle only one per project): Solar Heating Panels

Lanai Enclosure (addition or change)    Satellite Dish (NOT ALLOWED ON ROOF)    Tree Removals\*\*    Landscaping    Painting  
Storm Shutters    New Construction    Storm Door (approved style/color on HOA website)    Other

Narrative/Description: \_\_\_\_\_  
\_\_\_\_\_

\*\*FishHawk CDD approval will also be required for Tree Removal.

**INCLUDED (please circle all that apply):** Copy of Official Lot Survey    Specifications for Alteration    Color Swatches

Material Sample    Brochures    Photographs    Drawings    Statement from arborist indicating if permit is needed

\*\*We will require a written statement from the certified arborist as to whether a permit is required or is not required for a tree removal.

**Note: A LOT SURVEY MUST BE SUBMITTED WITH THE APPLICATION. THE IMPROVEMENT MUST BE SHOWN ON THE SURVEY. INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE HOMEOWNER.**

The undersigned property owner hereby acknowledges and agrees that the undersigned shall be solely responsible for determining whether the improvements, alterations or additions described herein comply with all applicable laws, rules and regulations, code, and ordinances: including, without limitation, zoning ordinances, subdivision regulations, and building codes. The ACC shall have no liability or obligation to determine whether such improvements, alterations and additions comply with any such laws, rules, regulations, codes or ordinances.

**SIGNATURE OF OWNER** \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

FAX: \_\_\_\_\_

**PLEASE ALLOW UP TO 30 DAYS TO RECEIVE AN APPROVAL FROM THE ARCHITECTURAL REVIEW BOARD**

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NAME OF OWNER: \_\_\_\_\_

**ACTION OF THE ARC COMMITTEE:**

\_\_\_\_\_ APPROVED

\_\_\_\_\_ RECOMMEND APPROVAL WITH CONDITIONS: \_\_\_\_\_

\_\_\_\_\_ REQUEST DENIED FOR THE FOLLOWING REASON: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date

ARC COMMITTEE MEMBER

Follow up inspection completed by: \_\_\_\_\_

Name

\_\_\_\_\_

Date