

Pottsburg Crossing Condominium Association

The CAM Team, Inc., 2233 Park Avenue, Suite 103, Orange Park, FL 32073
arc@thecamteam.com | (904) 278-2338

Architectural Review Request for Alteration or Additions

Owner's Name: _____ Unit Number: _____

Owner's Mailing Address: _____

Date Submitted: _____ Daytime Phone: _____ Home/Cell Phone: _____

What type of alteration/addition are you requesting? Screen enclosure: _____ Pool: _____ (Requires Building Permit)

Shutters: _____ Awning: _____ Entry Door: _____ Mailbox _____ Satellite Dish: _____ Other: _____

If other, please describe in detail: _____

Fence: (Requires a copy of your property plan with fence drawn on plan and if necessary a current survey as well as the requirement to have the fence installed with the smooth side facing out (towards the street).

You MUST provide the following information:

1. Complete description, including plans, of alterations or additions.
2. Type of materials to be used and a sample of colors (Must submit paint chip of color with all painting requests).
3. Drawings, pictures, brochures, etc.

Contractor Information:

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Phone number: _____ License Number: _____

Contractor Signature: _____ Date: _____

ARCHITECTURAL CONTROL COMMITTEE REVIEW

Approved: _____ Denied: _____ Date of review: _____ Approved by: _____

Conditions of Approval: _____

Reason for Disapproval: _____

Note: Only the homeowner listed on the title to the property may request architectural approvals. If a contractor is hired, they must provide the Association with proof of licensing and insurance prior to commencing work. They must also provide copies of City of Jacksonville building permits and final inspection reports.

Note: This approval is for architectural review purpose only. This approval does not overrule any Federal, State or Local governing agencies regulations, permit requirements, etc., for the desired construction. It is the responsibility of the lot owner to obtain and comply with such.

NOTE: Project must be completed within three (3) months from the date of this approval or this approval will be null and void, requiring you to resubmit another package for approval. Additionally, the ARC has 30-days from the date this request is received to act on this request, DO NOT START WORK WITHOUT AN APPROVAL.

Please make note of this requirement.

File Date: _____ Final Inspection Date: _____

Did improvement comply with approved ARC Request: _____ YES _____ NO, if no, action taken: _____