



## ARCHITECTURAL REVIEW APPLICATION FORM

Fill out this form completely and submit with all required documentation:

Online: [whisperduneshoa.com](http://whisperduneshoa.com)

Mail: Whisper Dunes HOA, c/o Rizzetta & Company, 3434 Colwell Ave, Suite 200, Tampa, FL 33614

Hand Deliver: Sally Kocurek ARC Chairman - [sally@enhancedimage.com](mailto:sally@enhancedimage.com)

Name of Resident Requesting Modification: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

**Skip to Page 2 if you submitted your request online.**

**ALTERATION TYPE** Required City/County Permits are the responsibility of the owner/contractor to provide.

\_\_\_\_\_ Landscape Front Yard

\_\_\_\_\_ Screen Enclosure

\_\_\_\_\_ Roof

\_\_\_\_\_ Landscape Back Yard

\_\_\_\_\_ Additional Construction\*

\_\_\_\_\_ Gutters

\_\_\_\_\_ Concrete/Pavers

\_\_\_\_\_ Doors/Windows

\_\_\_\_\_ Electrical/Propane\*

\_\_\_\_\_ Fence Installation\*

\_\_\_\_\_ Painting

Please describe in detail the modification being requested. Include the nature, kind, shape, height, colors, materials, and location. Please include drawings of improvements drawn to scale, drawing of improvements on a plat map of your property, and colored photos of area to be changed. **\*A Lot survey/site plan illustrating the precise location of the proposed project and city permit is required.**

---

---

---

---

CONTRACTOR: \_\_\_\_\_  
Company/Individual

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Contractor's License Number \_\_\_\_\_

Please attach copies of certificate of insurance, occupational license, permits if applicable.

**Please read and initial at each designated area. Failure to do so may result in delaying or denial of your request.**

Read & Initial:

- \_\_\_\_\_ Requests for Architectural/Landscape improvements or changes must be submitted in writing to the Whisper Dunes HOA management company in sufficient detail for the ARC to determine its intent and impact upon the property, as well as the surrounding area. Improvement requests will be in accordance with Whisper Dunes Covenants and Restrictions and ARC Guidelines.
- \_\_\_\_\_ I understand that any replacements or additions which are approved must comply with all city, county, and state building codes and regulations and it is the responsibility of the owner/contractor to obtain all necessary permits/approval prior to work beginning.
- \_\_\_\_\_ I understand that only the specific work approved by the ARC/Board may be done. Any Job changes/modifications to the original approval must also be submitted to the ARC/Board for additional approval.
- \_\_\_\_\_ All work must be completed within 6 months of ARC/Board approval.
- \_\_\_\_\_ Any modifications that affect the performance of the irrigation system requires the irrigation system be modified to assure same irrigation coverage as before the modifications at my expense.
- \_\_\_\_\_ All surfaces to be painted must be colors listed in the color charts for the applicable area. See Paint List on our website.
- \_\_\_\_\_ I am the owner of the property that the proposed Architectural/Landscape improvement request affects. The proposed change does not affect surrounding areas.
- \_\_\_\_\_ I acknowledge that installation of a change without ARC approval may result in a Violation fine in accordance with Whisper Dunes governing documents and rules. I realize that I may also be required to remove the change and restore to pre-change condition at my expense. Furthermore, as an owner, I understand I may not be able to sell my property if the property deviates from Whisper Dunes standards.
- \_\_\_\_\_ I have read Article IX. Architectural Control.
- \_\_\_\_\_ I have read Article X. Use Restrictions in the official Whisper Dunes Rules & Regulations document.
- \_\_\_\_\_ I have read the current ARC Guidelines for Whisper Dunes.
- \_\_\_\_\_ I agree any work performed will match the design and harmony of existing surroundings.
- \_\_\_\_\_ I will call 811 to have all utilities marked before any digging.
- \_\_\_\_\_ I/We understand that approval of our request must be granted before I/we can have the job started. I/we acknowledge that this request is granted as presented and must be completed as presented. I/we understand that any expense incurred as a result of city/county code changes is my responsibility.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date