TWIN LAKES SUBDIVISION ASSOCIATION, INC. 4917 Ehrlich Road Suite 104 Tampa, FL 33624 Phone 813.908.0766. Fax 813.908.6833

Email LisaD@wcmanagement.info

Is this applicati	ion a resubmittal of a pi	revious application? Yes / 1	No (circle one) Date Sub	omitted:
The undersign	ned owner seeks appr	oval of the Committee as	follows (circle all that a	ipply):
Pool / Spa	Screen Enclosure	Solar Heating Panels	Satellite Dish	Fence
Landscaping	Painting	Storm Shutters	New Construction	Other
Narrative Description of Additions/Alterations:				
(Continue on A	Additional Sheet if Ne	cessary)		
	LEASE CIRCLE ALL TH	• •		
proper 2. Specif 3. Color: 4. Mater 5. Broch 6. Photo 7. Drawi The undersigneresponsible for with all applica ordinances, suddetermine whee	rty. ication for Alteration Swatches ial Sample ures graphs ings ed property owner here determining whether table laws, rules, and reg	Please indicate on lot surve by acknowledges and agre the improvements, alterational ulations, code, and ordinan nd building codes. The ACC ts, alterations and additions	es that the undersigned s ons or additions describe ces: including without lin C shall have no liability or	shall be solely d herein comply mitation, zoning · obligation to
SIGNATURE OF OWNER:			_DATE:	
PRINTED NAME:		ADDRESS:		
LOT & BLOCK NUMBERS:		PHONE: (H):	(C):	
EMAIL ADDRES	SS:			
PLEASE ALLOV	W UP TO 30 DAYS TO	RECEIVE AN APPROVAL F	ROM THE ARC COMMIT	ТЕЕ
		ACTION OF THE COMMIT	rtee:	
RECOM	MEND APPROVAL WIT	H CONDITIONS:		
REQUE	ST DENIED FOR FOLLO	WING REASON:		
Architectural C	Control Committee:		Date:	