



Owner's Request for Architectural Approval

*Either email completed form to Steven.Higbee@Argusmgmt.com
or drop it off in the gray 'drop box' at the Community Center*

IMPORTANT

- For a faster approval, it is imperative the owner initials the Disclaimer on page 2 and signs the "Owner's Signature" field.
- Please provide samples when applicable.
- Architectural review approvals are needed for all major property projects: i.e.: painting, roof repair and replacement, solar panels, driveways, major landscaping (including tree removal/replacement) and general maintenance (applies to other exterior projects.)

Please note: All approvals are subject to easements and restrictions of records.

Owner to Complete:

Date: _____

Property Owner Full Name: _____

Property Address: _____

Owner Telephone Number: () _____

Alternative Number: () _____

Owner Email address: _____

Expected Start Date: _____ Estimated Completion Date _____

Change Requested: _____

Location - ATTACH A COPY OF THE PLOT PLAN/SURVEY, DRAWING OR PICTURE INDICATING THE LOCATION OF THE PROPOSED CHANGE/INSTALLATION: _____

Dimensions: _____

Material: _____

Color - sample(s) or color chip must be provided _____

Called _____ P/U _____

**Please initial DISCLAIMER below and
sign the “Owner’s Signature” field**

This request form is to be completed by the homeowner and submitted to the Architectural Review Committee (ARC) for approval BEFORE any work commences. Please complete both pages and:

email to Steven.Higbee@Argusmgmt.com
or drop it off at the **River Wilderness Community Center at One Wilderness Blvd.**
or mail to: **River Wilderness Community Center**
One Wilderness Blvd.
Parrish, FL 34219

DISCLAIMER

Per the Governing Documents: OWNERS ARE RESPONSIBLE FOR THE WORK/ACTION OF PERSONS UNDER THEIR EMPLOY, DIRECTION OR AUTHORITY. Homeowner is completely responsible for any/all damage to common property, including repair cost. Please supervise the work to ensure that damage to common areas does not occur or is incurred. ALL REQUESTS MUST CONFORM TO THE LOCAL ZONING AND BUILDING REGULATIONS AND OWNERS ARE RESPONSIBLE FOR OBTAINING THE NECESSARY PERMITS, IF YOUR REQUEST IS APPROVED.

(Owner’s Initials _____) Please sign and date.

Owner’s Signature: _____

Date Signed: _____

Owner’s Address: _____

SITE PLANS AND COLOR SAMPLES MAY BE REQUIRED, PHOTOS AS NECESSARY

Office Use Only – *(Please do not write in the area below)*

Received by ___ Argus ___ Community Center ___ Committee Date _____

Approved as submitted Approved with Condition(s) Denied

(Print Name) _____

Signature _____

Date _____

Comments _____

Please do not write in this area.