

**CHEVAL PROPERTY OWNERS' ASSOCIATION, INC.**

**3939 Cheval Blvd., Lutz, FL 33558 Phone: 813-949-6058**

DATE SUBMITTED: \_\_\_\_\_ DATE RECEIVED BY ALRC: \_\_\_\_\_

FEES:  Major alteration fee of **\$250** (if building permit is required)  
Bond fee of \$2,500 (for major construction e.g., additions, garages, etc.)

The undersigned owner seeks approval of the Committee as follows:

- \_\_\_\_\_ Additions/Alterations of Existing Structure and/or property  
\_\_\_\_\_ **1 copy of your property survey must be attached. On this site plan, show dimensions, setbacks, landscaping, include gallon and height plant size, ancillary equipment, etc.**
- \_\_\_\_\_ New Structure – 2 Copies of Plans Enclosed Including Lot Survey, Landscaping Plan, Location of Ancillary Equipment and Exterior Materials and Colors.

Narrative Description of Additions/Alterations \_\_\_\_\_  
\_\_\_\_\_

**Anticipated Completion Date:** \_\_\_\_\_

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, regulations, codes, and ordinances; including, without limitation, zoning ordinances, subdivision regulations, and building codes. The ALRC shall have no liability or obligation to determine whether such improvements, alterations, and additions comply with any such laws, rules, regulations, codes, or ordinances.

I agree not to begin property improvement(s) until the Architectural & Landscaping Review Committee (ALRC) notifies me in writing of their approval. If any change is made that has not been approved, the Committee has the right to ask me to remove the improvement from my property.

***I WILL NOTIFY THE ALRC IN WRITING WITHIN 30 DAYS OF COMPLETION OF THE PROJECT AND PROVIDE THE NOTICE OF COMPLETION AND PHOTOGRAPHS OF ALL VIEWS OF COMPLETED WORK TO THE ALRC.***

SIGNATURE OF OWNER: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_  
STREET ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
TELEPHONE (Home): \_\_\_\_\_ (Work): \_\_\_\_\_

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**Full approval of this application is subsequent to Notice of Completion where this Committee may find it necessary to request modification.**

\_\_\_\_\_ **RECOMMEND APPROVAL**      \_\_\_\_\_ **RECOMMEND DISAPPROVAL**

**COMMENTS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE: \_\_\_\_\_  
\_\_\_\_\_ ALRC

***THIS APPROVAL IS GOOD FOR ONLY 6 MONTHS AFTER THE DATE OF APPROVAL AFTER WHICH TIME YOU WILL NEED TO RESUBMIT FOR APPROVAL.***