Ashton View Homeowners' Association, Inc

Application for Architectural Review Committee

Submit Request to the online portal or to
NFI Property Management Solutions LLC, 7139 N. 9th Ave., Suite P, Pensacola, FL 32504
Phone (850) 484-2684 Fax: (850) 474-3551
Email: compliance@nfipms.com

Owner please be aware that you are responsible for obtaining any required permitting, observing all easements and setbacks and adhering to any local, state and federal laws. Also, if permits and inspections are required, please provide proof of passed inspection upon completion of project.

	Application Date
Owners Name	Telephone
Mailing Address (if different)	
Email:	
Exterior Change Request:	
	(Attach additional sheet if necessary.)
	sted. You will need to complete this form along with
	y of your survey, details for the project, dimensions,
height and materials, brochure or picture	, and colors and return to our office. APPLICATION'S
CANNOT BE SUBMITTED TO THE ARC WITHOU	JT ALL OF THE ABOVE REQUIRED INFORMATION.
MANAGEMENT COMPANY RECEIVES THE INFO	DECISIONS ON ALL REQUESTS (SEE YOUR CC&R'S). THE ORMATION AND SUBMITS IT TO THE COMMITTEE ON BEHALF THE OWNER OF THAT DECISION. THE MANAGEMENT TAKING PROCESS.
Estimated Start Date	Estimated Completion Date
Inc. You will be notified in writing of the decision of th	lines on what is and is not permitted in Ashton View Homeowners Association e committee. YOU MUST HAVE WRITTEN APPROVAL BEFORE COMMENCING on is not assuming any responsibility for the safety, construction, operation om the change in the property.
If required, have you applied for the proper pe	ermits from all government agencies? YES / NO
and/or observing all local zoning ordinances, setbacl inspections are required, please provide proof of passe agree to make the changes exactly as stated under improvements must be on my property or property lin	esponsibility for obtaining any and all necessary Building Permits, Variances and adhering to any local, state and federal laws. Also, if permits and ed inspections upon completion of project. If approved by the association, the terms, conditions and specifications as described in the approval. Also, if any portion of the Associations property is disturbed or damaged by the for and to restore the common elements to their original condition.
Signature of Applicant:	Date:
Date Received Received By To be completed by Architectural Review Committee:	Date Processed Date Mailed
To be completed by Architectural Review Committee:	
Approved DisapprovedConditi	onal Approval-Condition: