



2004 Longmeadow, Sarasota, FL 34235
941-377-2300 administration@meadowsc.com

APPLICATION FOR ARCHITECTURAL REVIEW

INSTRUCTIONS: Please completely fill out all sections. The Standards Committee has 30 days to process and review the submission, however renovations can take up to 60 days depending on the nature of improvement. A separate application is required for each modification.

Please Print

Owners Name: _____ Phone: _____

Association Name: _____

Property Address: _____

Mailing Address (if different): _____

Estimated Start Date: _____ Estimated End Date: _____

Email Address: _____

2nd Email Address: _____

INFORMATION

GENERAL: Thank you for taking the time to complete this application. The MCA appreciates your cooperation and has worked to make the application process to be as simple and efficient as possible. **This application is required when exterior changes are made to any property in The Meadows.** The Standards Committee Chair along with the MCA Representative will review all architectural applications. Some applications, involving unusual colors, architecture or major changes in appearance will be sent to the Standards Committee for formal review. The staff has been given the authority to approve some projects, mostly involving “like for like” replacements if a committee member isn’t present. Upon review, the architectural application will either be approved or denied based on the nature of the improvement and the extent allowed according to the Meadows Community Association documents.

PURPOSE: The purpose of architectural review is to ensure that the high-quality standards of The Meadows are upheld. This is promoted when your application is reviewed by qualified people whose goals and objectives are:

1. To conserve the natural beauty and character of The Meadows.
2. To preserve the appearance of The Meadows by ensuring that structures, signs, and other improvements or changes are properly related to their sites.
3. To protect and enhance The Meadows appeal, and to enhance the value of Meadows property.
4. To adhere to the covenants and restrictions applicable to the neighborhoods.

INSTRUCTIONS: You have received one or more sections to complete for the type of project you plan. Each one should be self-explanatory. The MCA staff will assist you by reviewing your application for completeness. Please submit single-sided only. Paper clip pages together, no staples.

AGREEMENT

1. No work or commitment of work will be made by me until I have received all necessary written approval(s) from the HOA/Condominium Association and/or MCA as applicable. The Standards Committee and/or the MCA reserves the right to request additional information.
2. All work will be done at my expense and all future upkeep will remain at my expense.
3. All work will be done expeditiously once commenced and will be done in a good workman-like manner by myself and/or a licensed and insured contractor.
4. All work will be performed at a time and in a manner to minimize interference and inconvenience to other homeowners.
5. During construction of any approved modification or improvement, all portions of the property shall be kept clean, neat and in orderly condition at all times. Any debris, trash or material resulting from construction shall be promptly removed or remedied as appropriate, from the lot, unit, limited and/or common area on a daily basis.
6. Access to areas of construction is to be made exclusively through the individual owner's lot/property only.
7. I assume all liability and will be responsible for all damage and/or injury which may result from performance of this work. As well as any additional maintenance cost that may be incurred as a result of the modification, improvement, violation of the rules and regulations and/or negligence on his behalf and/or his contractors/vendors.
8. I will be responsible for the conduct of all persons, agents, contractors, and employees who are connected with this work.
9. I will be responsible for complying with, and will comply with, all applicable federal, state and local laws, codes, regulations and requirements in connection with this work, and I will obtain any necessary governmental permits and approvals for the work. I understand and agree that the MCA, its Board of Directors, its agents and/or the Standards Committee have no responsibility with respect to such compliance and that the Board of Directors and/or its designated committee's approval of this request shall not be understood as the making of any representation or warranty that the plans, specifications or work comply with any law, code, regulation or governmental requirement.

*****NOTE***:** All submitted materials shall remain the property of the MCA. It is recommended that the homeowner make and keep a copy of these records and transfer copies to the new homeowner upon sale of the property.

I hereby acknowledge that I have read and understand the **ARCHITECTURAL STANDARDS** above.

Homeowner's Signature: _____ Date: _____

Homeowner's Signature: _____ Date: _____

PAINTING

Sarasota County, and other applicable agencies, may require permits for projects in this category. Examples Are: Wood, block, or concrete construction, electrical, plumbing or air conditioning/heating work. All permits are the responsibility of the applicant.

NOTE: All color samples are required and are to be attached to this application.

Some samples may be required to be larger than paint store samples.

Items to Be Painted	Existing Color	Proposed Color
House: _____	_____	_____
Trim: _____	_____	_____
Garage Door: _____	_____	_____
Front Door: _____	_____	_____
Other Items: _____	_____	_____

PLEASE NOTE: Approved projects must be commenced within **3 months** of approval. Substantial amounts of work must be completed in each 60 day period thereafter.

By signing this application on behalf of the condo/HOA, the signer represents that he/she has the authority to do so.

CONDO/HOA APPROVAL: _____ **DATE:** _____
(If Applicable) Please Print

CONDO/HOA APPROVAL: _____
(If Applicable) Signature Position on Board

ASSOCIATION NAME: _____

MCA APPROVAL: _____ **DATE:** _____

SIGNATURE: _____

(This space for MCA USE ONLY)

DUMPSTER/POD/TRAILER/TRUCK INFORMATION

Use this form if Dumpster, Pod, Trailer or Truck will be left on your property overnight

Date: _____ Date (s) Needed: _____

Name: _____ Phone: _____

Meadows Address: _____

(CHECK ONE) ☐ Dumpster ☐ Pod ☐ Trailer ☐ Truck ☐ Port-a-Potty

Location of above: (ex: driveway, roadway, guest parking) _____

Truck description: Make _____ Model _____ License _____ Color _____

On street parking: (circle one) Yes or No

Vehicles must be parked facing in the direction of traffic and only on one side of the street with tires in the curb.

Condo or HOA Association Approval: _____

Comments or Concerns: _____

Brief Reason for Need: _____

Copy to Safety _____