

**ARCHITECTURAL REVIEW BOARD
Campbell Crossing Owners Association Inc.**

Lot # _____ Block # _____ JOB ADDRESS: _____

Owner's Name _____ Phone No. _____ Email _____

Mailing Address: _____

Contractor's Name _____ Phone No. _____ Email _____

Mailing Address: _____

Description of Work to be Completed: _____

EXTERIOR MATERIALS & COLORS:

EXTERIOR PAINT / WALLS – Paint Manufacturer _____ (Must be from same manufacturer)

EXTERIOR PAINT Wall Selection: _____ Trim Selection: _____

Garage Door: _____ Entry Door: _____

EXTERIOR ROOF MATERIAL: ASPHALT DIMENSIONAL _____ **COLOR:** _____

STONE ACCTS Style _____ Color _____

SOFFIT / FACIA _____

DRIVEWAY _____ **Color:** _____

OTHER (patios, privacy panels, landscaping, exterior alterations, etc.):

Description: _____

The following items must be submitted with the above information

Applicable Details

Survey with the exterior work marked (landscaping, privacy panels etc.).

All new construction, changes and additions must be in compliance with Campbell Crossing Owners Association Covenants and Restrictions, and all amendments thereto. Please read them carefully prior to beginning your project. The lot owner will be responsible for the cost of repairing damages to Homeowners Association property as a result of construction and/or alteration approved herein. The owner is responsible for obtaining all pertinent and applicable City, County and/or State permits necessary for proposed change, addition or enhancement and is also responsible for ensuring the proposed change does not negatively impact the drainage on the property or cause damage of any kind to adjoining properties, whether commonly or privately owned. The Owner is responsible for maintenance on any additions to landscaping installed on any portion of the owners property. The Association will not be responsible for maintenance, irrigation or replacement of owner installed landscaping.

SUBMITTED BY (Homeowner or Contractor):

Name: _____
(Signature) (Print)

ARCHITECTURAL REVIEW BOARD:

Signature: _____ Date: _____

Approved _____ Approved as Noted _____ Denied _____ Date: _____

ARB Committee Comments / Notes: _____

All applications shall be submitted prior to commencement of work to: Campbell Crossing – 1648 Taylor Rd # 115- Port Orange FL 32128

Via email at: laura@camprosfl.com