

POINTE WEST

A Traditional Community  Vero Beach, Florida

POINTE WEST POA ARCHITECTURAL REVIEW REQUEST

c/o Elliott Merrill Community Management
835 20th Place, Vero Beach, FL 32960
772-569-9853

DATE: _____

HOMEOWNER: _____ PHONE: _____

ADDRESS: _____ LOT #: _____

CELL PHONE: _____ EMAIL: _____

Please note:

You **MUST** provide a description of the work in the space below.

A sketch, plan, drawing, photo, or sample is **REQUIRED** to be attached to this form showing your proposed exterior modification. Please refer to the Association Documents prior to filling out this application to avoid delay.

PLEASE ALLOW 14-30 DAYS FOR APPROVAL. THANK YOU.

Description of work to be done (REQUIRED):

APPROVED _____

CONDITIONAL _____

DENIED _____

By: _____

DATE: _____

Comments: _____

OWNER IS RESPONSIBLE FOR MAKING SURE THAT THE CONTRACTOR IS LICENSED AND INSURED.

Please submit this completed form to the Pointe West Property Owners Association
c/o Elliott Merrill Community Management, 835 20th Place, Vero Beach, FL 32960
Phone 772-569-9853 & Fax 772-569-4300 E-MAIL – jeanb@elliottmerrill.com

Reply will be e-mailed unless noted differently during submittal