



## Request For Architectural Change (RAC form)

Date:	Owner(s)Name(s):_		
Naples Address:			
Telephone: (Home)		(Cell)	
Alternate address:			
Alternate Phone:		E-Mail:	
Describe request change:			
Attach plans/drawings to	this request and include p	aint samples ar	and color schemes if applicable.
Signature of owner		_ Signature of	f owner
Local Homeowners Asso	ociation name:		
that you feel are appropri two sets of the RAC with	iate including any conditio	ons that you wore to the ARC (le	approve or reject it and add any comments ould like the ARC to consider. Forward leave at the club house office). Also, ext Board Meeting.
Local Association appro-	ved:, not ap	oproved:	, Vote:
Signature of HOA Presid	lent:		Date:
HOA Comments:			
Cedar Hammock Archite	ectural Review Committee	Approved:	Not Approved:
Chairperson Signature:	WIED AT 2		Date Approved:
			oe completed and all approvals secured ORE any work commences.