

REQUEST FOR ARCHITECTURAL CHANGE

Name of Association: AVONDALE  
C/O Phoenix Management Services, Inc.  
3082 Jog Road  
Lake Worth, FL 33467  
FAX: 561-964-8731

Date of Request: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Owner Address: \_\_\_\_\_  
\_\_\_\_\_

Lot /Block Number: \_\_\_\_\_

.....  
I hereby request permission to make the following change(s) to my home:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please Note:* An Architect's drawing and/or diagram, listing the specifications to be used (including material and dimensions) **MUST** accompany this request in order to be considered by the Architectural Review Committee.

Contractor to be used: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_

Contractor's Telephone: \_\_\_\_\_

**OWNER SIGNATURE:** \_\_\_\_\_

**OWNER SIGNATURE:** \_\_\_\_\_

No work is to begin unless the Owner has received WRITTEN permission to proceed with the above requested change from the Architectural Review Committee, through the Management Company, Phoenix Management Services, Inc.

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