

AMHERST VILLAGE
PROPERTY OWNERS ASSOCIATION, INC.
ARCHITECTURAL CONTROL BOARD (ACB)
architectural@villagesservices.net
352-746-6770

REQUEST FOR CHANGE FORM

All necessary documentation/information must be provided promptly. This application expires 30 days after receipt.*

Today's Date: _____

Homeowner's Name and signature

Homeowner's Address:

Homeowner's Phone #:

Homeowner's Email Address:

*Provide a brief but specific, written description of what work/project you are planning.

*Attach a copy of your site plan, including distance to property lines (when applicable) that clearly illustrates all changes/additions you are planning.

*Include contractor specs, pictures of product, diagrams, color selections, materials, plant names, etc.

*Additional information may be required for certain projects. You will be contacted via e-mail if necessary. The ACB will start the review process when all the information has been submitted

APPROVED _____ DISAPPROVED _____ Date: _____