

**NEW CONSTRUCTION/EXTENSIONS/POOLS/SHEDS  
PLAN APPROVAL CHECKLIST  
RIVERHAVEN VILLAGE PROPERTY OWNERS ASSOCIATION**

**PHASE 3**

**FOR ACB USE ONLY:**

DATE RECEIVED: \_\_\_\_\_

ACB PERMIT #: \_\_\_\_\_

CITY PERMIT #: \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_

HOMEOWNERS NAME: \_\_\_\_\_

ADDRESS FOR APP: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

CONTACT PHONE: \_\_\_\_\_

**REQUIRED INFORMATION FOR FENCES**

**NEW CONSTRUCTION REQUIRES: ONE (1) SET OF CONSTRUCTION PRINTS (FRONT, REAR, AND BOTH SIDE ELEVATION) FLOOR PLAN AND A PLOT PLAN OF THE LOT AND CONSTRUCTION AREAS.**

- BLUE PRINTS
- PLOT PLAN
- LANDSCAPE PLAN

BUILDER/SUPPLIER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SQUARE FOOTAGE: \_\_\_\_\_ 1 STORY MINIMUM 1100 SQ. FEET, 2 STORY  
MINIMUM 1500 SQ FEET EXCLUSIVE OF GARAGE, COVERED WALKS, PATIOS OR POOL AREAS)

- ATTACHED GARAGE
- DETACHED GARAGE (MUST HAVE WRITTEN CONSENT FROM ASSOCIATION)

CONTACT PHONE: \_\_\_\_\_

ROOF: PITCH \_\_\_\_\_ MAIN ROOF OF THE DWELLING SHALL HAVE A PITCH OF NOT LESS THAN 3 TO 12 FEET

TYPE OF ROOF: \_\_\_\_\_

**METAL MAY BE USED AFTER MEETING THE FOLLOWING CRITERIA:**

1. THE MEMBER REQUESTING APPROVAL FOR A METAL ROOF (OR ROOFS) FOR NEW CONSTRUCTION OR REPLACEMENT OF AN EXISTING ROOF SHALL PROVIDE A MANUFACTURERS CERTIFICATION THAT THE PROPOSED METAL ROOFING MATERIAL MEETS OR EXCEEDS THE APPLICABLE STATE AND COUNTY BUILDING CODES, INCLUDING THE APPLICABLE WIND CODES THEN IN EFFECT.

2. THE PROPOSED METAL ROOFING MATERIAL SHALL BE WARRANTED FOR A MINIMUM OF THIRTY (30) YEARS.

3. THE COLOR, TEXTURE, STYLE AND GENERAL APPEARANCE OF THE PROPOSED METAL ROOFING MATERIAL SHALL BE COMPATIBLE WITH THE COLORS, STANDARDS AND STYLES OF THE ROOFS INSTALLED IN THE COMMUNITY. THE APPEARANCE OF PROPOSED METAL ROOFING MATERIAL SHALL RESEMBLE, WHEN INSTALLED, SINGLE, TILE OR SHAKE ROOFS. PROPOSED METAL ROOFING MATERIALS WHOSE APPEARANCE WHEN INSTALLED, RESEMBLES VERTICLE OR HORIZONTAL FLAT PANELS (FOR EXAMPLE "BARN ROOFS" ARE SPECIFICALLY PROHIBITED.

GARAGE DOOR: FACING \_\_\_\_\_ (MAY FACE THE STREET)

**SET BACKS:**

FRONT \_\_\_\_\_ 25 FEET

SIDES \_\_\_\_\_ 7.5 FEET

REAR \_\_\_\_\_ 15 FEET

YOU MAY REQUEST A REPRESENTATIVE OF THE ACB TO MEET WITH YOU DISCUSS ADDITIONS OR CHANGES TO YOUR PROPERTY. PRIOR TO SUBMITTING YOUR REQUEST, CALL 352-746-6770 TO MAKE AN APPOINTMENT.

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**ACB USE ONLY:**

**APPROVED BY:**

- 1. \_\_\_\_\_ DATE: \_\_\_\_\_
- 2. \_\_\_\_\_ DATE: \_\_\_\_\_
- 3. \_\_\_\_\_ DATE: \_\_\_\_\_
- 4. \_\_\_\_\_ DATE: \_\_\_\_\_

- 5. \_\_\_\_\_ DATE: \_\_\_\_\_
- 6. \_\_\_\_\_ DATE: \_\_\_\_\_
- 7. \_\_\_\_\_ DATE: \_\_\_\_\_
- 8. \_\_\_\_\_ DATE: \_\_\_\_\_
- 9. \_\_\_\_\_ DATE: \_\_\_\_\_

**CONDITIONS TO BE MET (IF ANY):**

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