

**VILLAGES AT CYPRESS CREEK
MASTER PROPERTY OWNERS ASSOCIATION
DESIGN REVIEW APPLICATION**

NAME: _____

ADDRESS: _____

LOT / BLOCK #: _____ FOLIO#: _____

SUBMISSION DATE: _____

DAY PHONE: _____ NIGHT PHONE: _____

E-MAIL: _____

THE FOLLOWING ITEMS MUST BE SUBMITTED AND APPROVED BY THE DESIGN REVIEW COMMITTEE (DRC) **PRIOR TO COMMENCEMENT OF ANY CONSTRUCTION.**

1. Three complete sets of construction drawings.
2. Scale drawing of plot plan showing:
 - (A) Location of building or improvement.
 - (B) All set backs including overhangs.
3. Color chart showing all exterior colors.
4. Roofing type and color. Minimum roofing standards to be a dimensional shingle with a replacement life of a minimum of 30 years and LaPaloma roofs need to be a minimum of 50 years. Letter from roofing contractor to document the above stated requirements. Commercial roofing has additional requirements.
5. Landscape plan drawn to scale. Applicant is to install St. Augustine sod and an irrigation system sufficient in size to properly irrigate 100% of lawn and planting areas as established in Covenants and Restrictions for the Villages at Cypress Creek. Applicant further agrees to connect irrigation system to reclaimed water when it becomes available.
6. No metal porches or carports will be allowed. All homes must have a lanai area that is covered under the roof truss system of the house.
7. Any changes after approval will require an additional submittal to the DRC.
8. Any alterations after completion of approved work will require additional submittal to the DRC.

ALL CONSTRUCTION MUST CONFORM TO BUILDING CODES AND BE PROPERLY PERMITTED AS ESTABLISHED BY HILLSBOROUGH COUNTY.

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COMMENTS: (Use separate sheet if necessary):

SIGNATURE OF APPLICANT: _____

DATE: _____

PLEASE RETURN APPLICATION TO:

**VILLAGES AT CYPRESS CREEK MPOA
C/O MILLER FLORIDA HOMES MODEL CENTER
3634 GAVIOTA DRIVE
RUSKIN, FLORIDA 33573**

OR

VILLAGES AT CYPRESS CREEK MPOA
C/O UNIQUE PROPERTY SERVICES INC.
1207 N. HIMES AVENUE SUITE #3
TAMPA, FLORIDA 33607
PHONE: 879-1139

APPROVED BY DESIGN REVIEW COMMITTEE:

NAME: _____
NAME: _____
NAME: _____
NAME: _____

DATE: _____
DATE: _____
DATE: _____
DATE: _____