## **Summerhill Architectural Review Application**

To:	Summerhill Homeowner's Assoc., Inc. c/o Alsop Property Management		
	1 1 2	P.O. Box 1389 St. Augustine, FL 32085	
	(904) 647-2619 phone vw@alsopcompanies.com		
From:	Name		
	Address		
City,	State, Zip		
		Email	
	Lot #	Date	
Type o	of Proposed Improvement (ci	rcle below):	
- J P • •	1. Fencing	202 2020 ) .	
	2. Pool		
	3. Room Additions		
	4. Rear Enclosure		
	<ul><li>5. Irrigation Modifications</li><li>6. Exterior Color Change</li></ul>		
		ve Items (sculptures, fountains, etc.)	
		led measurements describing the size of the dish and	
	where it will be installed i		
	9. Other:		
A site p		ailing the location of the proposed improvements.	
Please	describe improvements (multiple	e improvements may be included on one application):	
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An application fee of \$10 will be charged for each ARB application. Updates to an existing application will not incur an additional fee. Checks can be made payable to Summerhill HOA.