

Windward Estates Homeowner's Association

Architectural Review Board (ARB)

EXTERIOR ALTERATION APPLICATION

(APPLICANT(S) MUST SIGN PAGE 3 OF THIS APPLICATION)

MAIL TO:

Windward Estates Homeowners' Association
Architectural Review Board
PO BOX 561011
Orlando, FL 32856-1011

BRING TO

Joseph Alvarez 4485 Yachtmans Court (407) 492-8088
OR Roy Cunningham or Rhonda Cunningham
4418 Yachtmans Court (407) 382-6734
Steve Diedrich 4574 Wheelhouse Court (407) 579-4975

To expedite application review, please deliver application package in duplicate to Joseph Alvarez, 4485 Yachtmans Court and he will review and obtain signatures for Board review

An application package, with signatures noting review from three (3) ARB members must be submitted in duplicate. Hard copy only. It is the homeowner's responsibility to obtain any required Orange County (or other) permits and to meet any other government conditions.

APPLICANT: (Please print in ink or type)

I _____, hereby request approval by the Windward Estates Homeowner's Association Architectural Review Board (ARB) for the following alteration to my home

located at (PROPERTY ADDRESS): _____

Phone (day) _____ Phone (evening) _____

Email: _____

I / WE WOULD LIKE APPROVAL FOR (ONE REQUEST PER APPLICATION). Check appropriate box and fill in blanks where applicable>

- | | | |
|--|--------------|-------------|
| <input type="checkbox"/> Privacy Fence | Color: _____ | Type: _____ |
| <input type="checkbox"/> Paint / Siding I | Color: _____ | Type: _____ |
| <input type="checkbox"/> Wall | Color: _____ | Type: _____ |
| <input type="checkbox"/> Screened Porch / Lanai | Color: _____ | Type: _____ |
| <input type="checkbox"/> Slab | Color: _____ | Type: _____ |
| <input type="checkbox"/> NEW Plants or construction in Landscape buffer** | Color: _____ | Type: _____ |
| <input type="checkbox"/> _____ | _____ | _____ |

**** SEE PAGE 4**

NOTE: The requirement to get ARB/ Board approval for replacing / repairing roof with asphalt shingles with current color/ style or asphalt shingles of color / style used by others in Windward Estates was eliminated on 10/2018. Residents wishing to use a metal or tile roof will need to seek ARB/Board Approval.

Are you or any household members disabled or impaired? Yes No

If yes, is this proposed alteration related to the enjoyment of the premises by that person? Yes No

DESCRIPTION OF CHANGES DESIRED:

- **Give full details as required by the Architectural Guidelines. Copies of Covenants & Restrictions can be downloaded from the WEHOA website www.windwardestates-hoa.org**

- **Include a copy of your plot plan showing dimensions, location of modifications relative to boundaries, structures, etc. Hand drawn sketches MAY be acceptable if they provide enough detail**

- **Attach any sketches, architectural drawings, and paint samples.**

I, the applicant and/or owner, understand:

- 1) I certify that the alteration to be made will not extend past my legal property line. I further understand that I shall assume responsibility for the maintenance of this alteration and / or modifications to my unit/ lot.
- 2) The applicant and/or owner assumes full liability for the research, preparation and completion of all construction, landscaping, etc.;
- 3) In the event of approval of my request for this alteration, I / we will assume all liability for any damage incurred as a result of this installation or alteration; and that a proper permit shall be obtained from Orange County, Florida.
- 4) All building permits for residential construction, must first be submitted to the Orange County Zoning Division. They can be contacted at 407-836-3111
- 5) Nothing herein contained shall be construed to represent those alterations to land or buildings in accordance with these plans shall violate neither any of the protective Covenants nor any of the provisions of Building and Zoning Codes of Orange County to which the above property is subject. Further, nothing herein contained shall be construed as waiver or modification of any said restriction;
- 6) Exterior alterations commenced without prior written approval of the Architectural Review Board run the risk of incurring cost of removal or modification and/or litigation;
- 7) Applications usually take approximately 7-10 days for review by the Architectural Review Board, and will be returned to the applicant after this review;
- 8) **Call Before You Dig:** If you are planning to dig in an area where there may be underground utilities, you must first contact Sunshine State One Call of Florida (1-800-432-4770) no less than two five full business days prior to excavation. Sunshine State One Call of Florida, in turn, will contact the utilities to schedule the line location. For more information, please contact Sunshine State One Call of Florida. www.callsunshine.com

9) Work as expressed on this application must be completed within 120 days after approval by the Architectural Review Board. Failure to complete the work within the prescribed period of time may cause the approval to be rescinded and resubmitted required. Extenuating circumstances must be brought to the attention of the ARB. Within 30 days of completion of approved alteration, I will notify the ARB that the work is finished so that my lot file can be accurately maintained.

OWNER SIGNATURE(S)

_____ (DATE) _____

_____ (DATE) _____

Board Use Only:

Architectural Review Board (ARB) Date Received by ARB: _____ Received by: _____

Majority of ARB Board must recommend approval as noted below before submitting to Board of Directors

Architectural Review Board Member: _____ (DATE) _____

☐ Approved ☐ Denied **Joseph Alvarez 4485 Yachtmans Court (407) 492-8088**

If denied, state reason: _____

Architectural Review Board Member: _____ (DATE) _____

☐ Approved ☐ Denied **Roy Cunningham OR Rhonda Cunnigham
4418 Yachtmans Court (407) 382-6734**

If denied, state reason: _____

Architectural Review Board Member: _____ (DATE) _____

☐ Approved ☐ Denied **Steve Diedrich 4574 Wheelhouse Court (407) 579-4975**

If denied, state reason: _____

Date Received by Board of Directors: _____ Received by: _____

This application will be reviewed by all members of ARB. Assuming that the majority of the ARB approves, the recommendation will be placed on the agenda of an announced Board of Directors meeting for consideration and residents will be notified within 5 business days.

The above request for alteration of (address) _____ has been ☐ Approved ☐ Denied

Reason denied: _____

Representing the Board of Directors: _____ (DATE) _____

NEW: Restrictions for any plants, trees, improvements, or construction within the 5-foot landscape buffer area along Gatlin Wall. Effective 10/27/24

There is a 5-foot “landscape buffer” along wall along Gatlin Ave. This has been in the Covenants and Restrictions since Windward Estates HOA was established in 1987. The HOA is responsible for maintaining the landscape buffer.

Trees/ plants planted within the landscape buffer caused significant damage to the wall in 2024, resulting in the removal of 13 trees along wall at HOA expense (\$7,500). The wall is now stabilized; no future repair is anticipated at this time. Repair to a masonry wall is very expensive.

Which homes are impacted by this Amendment? 11 homes are impacted by the “landscape buffer” as described above : Wheelhouse Court 4503, 4509, 4515, 4521, 4527, 4533 and 4359 and Yachtmans Court 4479, 4485, 4491, and 4497.

Effective 10/27/24

- Any plants, trees, improvements, or construction within the 5-foot landscape buffer area must be reviewed and approved in advance by the ARB and Board.
 - Approval to plant or construct within the 5-foot buffer area, if granted, will be contingent upon the Owners’ acceptance of responsibility for future damage to wall caused by plants, trees, or other improvements.

OWNER SIGNATURE(S)

_____ (DATE) _____

_____ (DATE) _____

- Any tree planted within 15 feet of wall must also be approved by the ARB and the Board. The purpose of this approval is to ensure that the root structure will not negatively impact the Wall.
 - The ARB and Board may require, depending on the type of tree to be planted, that the Owner submit a statement from a licensed arborist that the tree roots in the chosen location will not negatively impact the Wall in the future.

OWNER SIGNATURE(S)

_____ (DATE) _____

_____ (DATE) _____

Existing plants and/or structures in the landscape buffer are not included, i.e. grandfathered in.