



Wells Landing Association, Inc.

P.O. Box 2604

Orange Park, FL 32067-2604

## **ITEMS REQUIRING AN ARCHITECTURAL REVIEW BOARD REQUEST BY MEMBERS**

**AUTHORITY:** The Covenants (Art 7.2) provide that the Architectural Review Committee (aka Architectural Review Board) has full authority to regulate the use and appearance of the exterior of the Property. Further, "the Committee's prior approval is required for any and all changes (including color changes), alterations, additions, reconstruction, improvements or attachments of any nature whatsoever to the exterior of any Lot or Unit within the Property..."

**DISCUSSION:** An Architectural Control Form (aka A.R.B. Request) is provided as the next page to this document and can be found in Administrative Documents on [www.wellslanding.org](http://www.wellslanding.org). This form is required to be filled out and submitted to the Wells Landing Association Board through any Board Member (members listed under "About Us" on the website). The below listed activities are required to be submitted for Board approval by use of an Architectural Control Form prior to the commencement of change activity (this is NOT an all-inclusive list):

- New Roof
- New Exterior Doors and Windows
- Scheduled Unit Painting (every 8 years — see Painting and Roofing Requirements at [www.wellslanding.org](http://www.wellslanding.org))
- New Concrete Work
- Changes to Driveways/Sidewalks
- New Flagpole
- Changes to Pull Off Parking Spot
- Tree Removal (see Orange Park Residential Tree Removal Guide this website)
- Changes beyond the Yard Art Requirements (see Rules and Regulations this website)

**REMINDER:** Changes made without board approval of the ARB request, will require the homeowner to reverse the changes made at their own expense.

**Mail to:**

Wells Landing Association, Inc.

P. O. Box 2604, Orange Park, Fl. 32067-2604

Or give to a current Board Member

Approvals will be considered at Board Meetings

Date: \_\_/\_\_/\_\_

From: \_\_\_\_\_

Address: \_\_\_\_\_

Phone / Email: \_\_\_\_\_

Request:

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Homeowner Signature: \_\_\_\_\_

HOA VP Recommendation: Approval / Disapproval (Date): \_\_\_\_\_

H. O. A. President Signature Approval / Disapproval (Date): \_\_\_\_\_

(Rev 12/24)