

KEY LARGO OCEAN RESORT
ARCHITECTURAL REVIEW BOARD APPLICATION
PAINT COLORS
(Please submit 2 copies)

This part to be completed by KLOR staff:

ARB No: _____ Amount Paid: _____
Received By: _____ Check No.: _____
Date Submitted: _____

Applications must be submitted to the KLOR Administration Office at 94825 Overseas Hwy, Key Largo, Florida 33037

UNIT NUMBER: _____

APPLICANT
Name: _____
Address: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____

CONTACT PERSON (if different than applicant)
Name: _____
Address: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____

PAINT COLORS:

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HOUSE COLOR TRIM COLOR ADDITIONAL COLOR

I hereby certify that I am the owner of the subject property and that I have reviewed the subject application and authorize the applicant or applicant's representative (contact person) to make decisions that may affect my property as it pertains to this application.

Property Owner's Name (PRINT) _____
Property Owner's Signature / Date

Note to property owner: REVIEW AND APPROVAL OF THIS APPLICATION AND ATTACHED DOCUMENTS IS FOR COMPLIANCE WITH THE KEY LARGO OCEAN RESORT DESIGN GUIDELINES AND REGULATIONS FOR DEVELOPMENT. THE UN/TOWNER IS RESPONSIBLE TO OBTAIN THE PERTINENT PERMITS FROM THE AUTHORITIES HAVING JURISDICTION