 **Approved Disapproved**

Citrus Springs Civic Association New Construction

Deed Restricted Community Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1570 W. Citrus Springs Blvd. Permit No: \_\_\_\_\_\_\_\_\_\_

Citrus Springs, Fl 34434

Office: 352-249-7708

Office@citrusspringsca.org

**Property Owner**:

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Address**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_Email**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City, State, & Zip**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Legal Description of Property**

**Unit**: \_\_\_\_\_\_\_ **Lot**: \_\_\_\_\_\_\_\_ **Block**:\_\_\_\_\_\_ **Street & House** #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed Construction (Circle All that Applies)**

**Single Family: Y/N ,Living area (sq ft):\_\_\_\_\_\_\_\_ Front Entry (sq ft)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Porch (sq ft) \_\_\_\_\_\_\_\_\_\_\_\_Lanai (sq ft): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Garage (sq ft): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pool: Y/N Shape: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Size: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pool Cage: Y/N**

**\*Need site plan, model style picture and Payment\***

**Important Note**

The lot owner is liable for any damage to the street, swale, and/or sidewalk if done by equipment used by the contractor or subcontractor during work on the property. Applicants/Owner are responsible for monitoring any person working on their property to assure that no one trespasses on any greenbelt, easement, pedestrian walkway, community or private property; and that they observe all deed restrictions, noise, and other Citrus County ordinances.  **Initials \_\_\_\_\_\_\_\_**

**CITRUS SPRINGS DEED RESTRICTIONS BOOKLET, PAGE 11, (h)**

No building or structure having been manufactured off-site, including but not limited to any mobile home, modular home, kit home or building made of panels or sections constructed off-site and trucked to the site, shall be permitted for use as living quarters. No pre-manufactured log homes shall be permitted. **Initials \_\_\_\_\_\_\_\_\_\_\_**

**Acknowledge understanding each of the following sections by initialing each below:**

I HAVE BEEN PROVIDED THE DEED RESTRICTIONS PER CITRUS SPRINGS CIVIC ASSOCIATION. **Initials\_\_\_\_\_\_\_\_\_\_**

I HAVE READ AND FULLY UNDERSTAND THE CITRUS SPRINGS CIVIC ASSOCIATION’S DEED RESTRICTIONS**. Initials\_\_\_\_\_\_\_\_\_\_**

I AGREE TO FULLY ABIDE BY ANY AND ALL CITRUS SPRINGS CIVIC ASSOCIATION’S DEED RESTRICTIONS.  **Initials\_\_\_\_\_\_\_\_\_\_**

**FEE SCHEDULE**

New Single-Family Residence: $200.00, Pools: $50.00, Detached Garage/ Addition $150.00

All permits must be approved prior to construction start. The fines are doubled if permits are not obtained in advance. PLEASE SEE THE DEED RESTRICTIONS FOR COMPLETE INFORMATION

DATE RECEIVED BY CITRUS SPRINGS CIVIC ASSOCIATION: \_\_\_\_\_\_\_\_\_\_\_\_\_ Check #: \_\_\_\_\_\_\_\_\_\_\_\_ Amount : \_\_\_\_\_\_\_\_\_\_ Employee Initials: \_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_

Architectural Review Committee Initials: \_\_\_\_\_\_\_\_\_\_\_\_

It is a requirement that application by signed in presence of and affirmed by a Notary:

**Owner Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contractor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTARY

UNDER PENALTY OF PERJURY, I DECLARE THAT ALL THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT.

STATE OF FLORIDA, COUNTY OF\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sworn to (or affirmed) and subscribed before me by means of physical presence, this \_\_\_\_\_\_\_day

Of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who is \_\_\_\_\_\_\_Personally Known

Or \_\_\_\_\_\_\_ Produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_as Identification.

Notary Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_