



**Piney-Z Plantation Homeowners Association**  
 950 Piney-Z Plantation Road, Tallahassee, FL 32311  
 Email: [pineyzacc@gmail.com](mailto:pineyzacc@gmail.com)

# Architectural Control Committee (ACC) Request Form

*Complete top portion and return with required attachments via U.S. Mail, drop-off, or Email*

Name \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address (if different than above) \_\_\_\_\_

## MODIFICATION REQUEST

- |                                                                            |                                                                   |
|----------------------------------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> Fence (specify materials, style & sketch on plat) | <input type="checkbox"/> Landscaping (species & sketch on plat)   |
| <input type="checkbox"/> Pool or Spa (submit plans)                        | <input type="checkbox"/> Recreational Equipment (type & location) |
| <input type="checkbox"/> Repainting (submit swatches)                      | <input type="checkbox"/> Roof (manufacturer, type & color)        |
| <input type="checkbox"/> Screening (include mat, style and elevations)     | <input type="checkbox"/> Structural Addition (submit plans)       |
| <input type="checkbox"/> Structural Modification (submit plans)            | <input type="checkbox"/> Tree Removal (sketch on plat)            |
| <input type="checkbox"/> Other (description, plans, sketch, etc.)          |                                                                   |

## MODIFICATION DESCRIPTION

Contractor(s) \_\_\_\_\_

Scheduled Start Date \_\_\_\_\_ Scheduled Completion Date \_\_\_\_\_

## ACC REVIEW

Date Received \_\_\_\_\_ Date Reviewed \_\_\_\_\_ Phase \_\_\_\_\_

- APPROVED       CONDITIONAL APPROVAL       DISAPPROVED

Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

COMMENTS:

FINAL INSPECTION APPROVED      Date \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_