

## 

## **Architectural Control Committee Hurricane Shutter Installation Application**

and

Date:	
Property Address:	
Unit Owner Name:	
Mailing Address:	
Telephone # E-Mail Address:	
Hurricane panels, shutters and exterior window protection shall only be deployed/installed per the ACC Rules and Remust be removed per the ACC Rules and Regulations.	gulations
Estimated Cost:	
Description of product(s) to be used: Submit photos, product brochures, product specifications:	
Detail of colors to be used: Submit color samples	
Description of location where product will be installed: Front, sides, rear	
Installation company name, telephone # and address	
Approval: Granted: Denied: Date:	
Compliance Deposit Required: Yes Amount: No	
Signed:	