

**WOODLAND CREEK HOMEOWNERS ASSOCIATION  
P.O. Box 1495, West Palm Beach, FL 33402**

**ARCHITECTURAL REVIEW APPLICATION**

- Please remit the completed application to : [woodlandcreekhoafi@gmail.com](mailto:woodlandcreekhoafi@gmail.com)
- Please allow thirty (30) days for approval

WCHOA PROPERTY ADDRESS: \_\_\_\_\_  
Lake Worth, FL 33467 \_\_\_\_\_

Owner(s) Name: \_\_\_\_\_

Phone No. \_\_\_\_\_ Email: \_\_\_\_\_

Reason For Application: \_\_\_\_\_

Please include the **TYPE, MATERIAL, and COLOR** for the following:

**House Painting (must include color sample attached to this form):**

Main Color: \_\_\_\_\_ Trim Color: \_\_\_\_\_

**Roofing:** \_\_\_\_\_

**Fencing:** \_\_\_\_\_

**Siding:** \_\_\_\_\_

**Structures:** \_\_\_\_\_

**Contractor's Name and License No. :** \_\_\_\_\_

**Palm Beach County Building Permit No., if required :** \_\_\_\_\_

**Complete Description:** \_\_\_\_\_

Home Owner/Member Signature: \_\_\_\_\_

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

WCHOA Architectural Review Committee:

**Approved By:**

\_\_\_\_\_

\_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

**Denied By:**

\_\_\_\_\_

Print Name: \_\_\_\_\_

**Reason for Denial:** \_\_\_\_\_

\_\_\_\_\_

**Date:** \_\_\_\_\_

Review Committee Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CHANGES THAT DIFFER FROM THIS FORM MUST BE  
RE-APPROVED.**