SOUTHERN WOODS POA, INC.

CONTRACTOR'S ACKNOWLEDGEMENT OF CONSTRUCTION REQUIREMENTS

INCLUDING LANDSCAPING PLAN

(PLEASE PRINT ALL INFORMATION)

Block	Lot	Street Address	
Owner(s) Name			
Phone Number			Email
Contractor's Na	me:		
Phone Number:			_ Email
I am the contra	ctor of the ab	ove mentioned propert	y located in Southern Woods. I the undersigned am
authorized to a	ct on behalf o	of the Owners of the abo	eve mentioned property.
I have read and	agree to be l	oound by the Declaration	n of Covenants, Restrictions and Easements, the
Revised Restate	d By-Laws of	the Southern Woods PC	DA, Inc. (SWPOA) including the Rules and
Regulations of t	he Architectu	ıral Review committee (ARC).
All Documents	can be viewe	d on southernwoodshor	nosassa.com web site.
Contractor's Sig	nature:		Date:
Witness Signatu	ıre:		Date:
Witness Signatu	ıre:		Date:
This form must	be complete	d and included with a lar	ndscape plan and submitted with the permit package t
build applicatio	n.		