

# New Construction Plans Application

Cambridge Greens of Citrus Hills POA  
PROPERTY REVIEW COMMITTEE  
6606 W Gulf to Lake Hwy Crystal River, FL 34429  
352-794-1900 crystalriveradmin@qualifiedproperty.com

Building Permit Number: \_\_\_\_\_

Date of Application: \_\_\_\_\_ Date Received by PRC: \_\_\_\_\_

Home Owner's Name: \_\_\_\_\_  
Last Name First Name

Owner Address: \_\_\_\_\_  
Street City Zip

Building Site Address: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Builder: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Builder's Address: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Blue Print Included: Yes \_\_\_ No \_\_\_ Site Plan Included: Yes \_\_\_ No \_\_\_

SOD Allowance: \_\_\_\_\_ Sq ft. House: \_\_\_\_\_ Shed: \_\_\_\_\_ Fence: \_\_\_\_\_ Other: \_\_\_\_\_

## Home Size

## Colors

Living Square Footage (Minimum 1600") \_\_\_\_\_

Home: \_\_\_\_\_

Total Square Footage \_\_\_\_\_

Trim \_\_\_\_\_

Roof: Pitch \_\_\_\_\_

Door Front \_\_\_\_\_

Driveway Type: Cement: \_\_\_ Brick \_\_\_ Paver \_\_\_

Garage: \_\_\_\_\_

Driveway Shape: Circular: \_\_\_ Straight \_\_\_

Other: \_\_\_\_\_

Roof: \_\_\_\_\_

## Setbacks

Front: \_\_\_\_\_ (Minimum of 30 from property line- does not include RIGHTOF WAY)

Side: \_\_\_\_\_ (Minimum of 15 ft) Side (Street): \_\_\_\_\_ (Minimum 20 ft) Rear: \_\_\_\_\_ (Minimum 25 ft)

## Other:

Front Photocell Post lamp Location \_\_\_\_\_

Pool: Yes \_\_\_ No \_\_\_ Pool Cage: Yes \_\_\_ No \_\_\_ If Yes Plans/Permits: Yes \_\_\_ No \_\_\_

## PRC APPROVAL

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_