



EXCLUSIVE PROPERTY

MANAGEMENT GROUP

Any homeowner wishing to make an additional/ alteration to the outside of a parcel **must** complete and return this form.

❖ **WORK MAY NOT COMMENCE UNTIL THIS FORM HAS BEEN APPROVED IN ACCORDANCE WITH THE ASSOCIATION DOCUMENTS**

❖ All improvements must be completed within three (3) months of approval date.

❖ A copy of all Dade County permits is to be provided for association files.

Name of Owner: _____ Account Num.: _____

Property Address: _____ Balance: \$ _____

Day phone: _____ Community Name: _____

Approval is hereby requested for the following modification(s), and/or modifications as described below and/or on attached pages. Please indicate below what type of changes or alterations you wish to make. **Be specific**; indicating what type of material, color, shape, style, dimension, etc. In order to process this, request the following must be attached:

1. A photograph of your house where proposed changes will take place
2. A copy of the site survey with proposed modifications drawn on the survey showing both plain view and elevated view & specifications of the modification.

For doors, windows, hurricane panels and shutters a copy of the Miami-Dade County Product Control Approval or Notice of Acceptance is **needed**.

Select all that apply (

<input type="checkbox"/> Addition	<input type="checkbox"/> Patio
<input type="checkbox"/> Doors	<input type="checkbox"/> Play Structure
<input type="checkbox"/> Outdoor Lighting	<input type="checkbox"/> Pool
<input type="checkbox"/> Driveway	<input type="checkbox"/> Roof: Identical
<input type="checkbox"/> Awning	<input type="checkbox"/> Roof Repairs
<input type="checkbox"/> Gutters	<input type="checkbox"/> Satellite 18"/ Antenna
<input type="checkbox"/> Basketball Hoop	<input type="checkbox"/> Screen: Identical
<input type="checkbox"/> Exterior Plant	<input type="checkbox"/> New Screening/ Enclosure
<input type="checkbox"/> Garage Door	<input type="checkbox"/> Solar collectors
<input type="checkbox"/> Hurricane Shutters	<input type="checkbox"/> Window treatment
<input type="checkbox"/> Landscaping	<input type="checkbox"/> Wall Fence
<input type="checkbox"/> Iron, metal or similar bars	<input type="checkbox"/> Other: _____

Is this a re-submittal?:

Yes

No

Is this in response to a violation? :

Yes

No

Anticipated date of commencement

Time for completion of Improvement

Contractors/ Owners Signature

All changes and alterations shall be subject to all applicable permits requirements and to all applicable governmental laws, statutes, rules, regulation orders, and decrees. Neither the Board of Directors, nor any member thereof, shall be liable of the association, any homeowner, or any other person or entity for any loss, damage, or injury arising out of, or in any way connected with, the performance or non-performance of the board duties hereunder, unless due to the willful misconduct of bad faith of a member, and only that member shall have any liability. The board shall review and approve or disapprove all plans submitted to it for any proposed improvements, alterations or addition solely on the basis of aesthetic consideration and the overall benefit or detriment, which would result to the immediate vicinity and to the community.

Association Approval:	Neighborhood Name:	President or Authorized Rep.'s Signature
<input type="checkbox"/> Approved		_____ Title: _____

FOR OFFICE USE ONLY

Date of received application: _____ Received by: _____

Date of approval/ disapproval: _____

Approved Denied Deferred

Architectural Control Committee

Your approval is subject to the following:

1. You are responsible for obtaining any necessary permits from the appropriate building and zoning department(s).
2. Access to areas of construction is only to be allowed through your property. You are responsible for any damages done to the common area during construction.

Explanation of Conditions and/or denial: