ARCHITECTURAL MODIFICATION/IMPROVEMENT APPLICATION

Date:	COMMUNITY:
Application Information:	(Please print or type)
Name:	
Address:	
Telephone:	
Lot/Tract:	
State area of where Modification is Requested	:
Estimated Total Cost:	
Work Schedule:	
Commencement Date:	
Completion Date:	
Contractor:	
Contact Person:	
Address: Telephone:	
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ARCHITECTURAL COMMITTEE

You are hereby advised that the work described above is proposed and approval is requested. Attached are drawings and/or plans of work to be done and types of materials and/or colors to be used (in duplicate). We understand that the County and/or City may require building permits for improvements and that the costs of their permits and responsibility of obtaining such permits and subsequent inspections will be borne by us.

We acknowledge that all approved changes will be at our expense; that any and all damage to, or relocation of, existing sprinkler systems, underground utilities, building structures, and exterior landscaping or other damage resulting from the construction of the proposed improvement shall be at our expense. Additionally, any maintenance of permitted improvements shall be at our expense, and we agree to hold the Association harmless for the cost of maintenance of it. Furthermore, we agree to hold the Association harmless from any liability, damage and/or loss resulting from the construction or performance of the proposed modification. In the event of a sale we agree to notify prospective buyer(s) of any modifications made to the unit and advise them of the responsibility to maintain and repair.

OWNERS		
Signature(s) of <u>ALL</u> Owners:		
Name(s) (type or print):		
NOTE: Please submit all information	on (plans, specif	
FOR COMMITTEE USE ONLY:		
Date Received: Plans: sets Specs: Further Information Requested:	_ sets	Received:
Decision: Approved		
Conditions/Comments:		
BY:		
	Signature	e and Title