

FOREST LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

Application for Architectural Approval

The association requires all changes or modifications to the exterior of your home or lot to be approved in writing by the Architectural Control Committee before such changes or modifications are made to the exterior of your home or lot. In order for your request to be considered, you must provide the information on this application form:

Date of application: _____ Owner Name(s): _____

Address: _____ Legal Description Lot #: _____

Phone Number(s): _____ Email: _____

Please describe the improvements, modifications or changes and the reason for this request:

Attach a copy of your most recent survey, marked to show the size and exact location of the improvement, modification or change for which you are requesting approval. Note: most owners received a survey when they purchased their home.

Attach a copy of a properly detailed set of plans and specifications, any architectural drawings or other information that is available concerning your requests. If adequate information is not provided at the time of application, the committee will be unable to consider approval of your application and such time as adequate information is provided.

Indicate and/or provide samples of color, materials, texture and styles of materials to be used.

The following documents must be attached to your packet if you are using a Contractor:

A copy of the Contractor's License

A copy of the Contractor's Insurance Certificate

A copy of the Contractor's Workers Comp or Exemption Form

Please be advised that the committee is reviewing your application for location, appearance and conformity to Association documents and approval criteria. You are also required to submit your plans to the City for any required permits.

FOREST LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

By my (our) signature(s) below, I (we) declare services to be the sole owner(s) of the property described on the front of this application and attest that all of the information supplied is true and accurate, and I agree with, and will abide by the documents of the Association, the Architectural Guidelines of this Association as they shall be interpreted by the Architectural approval.

OBLIGATIONS: I (we) the sole owner(s) of the property described on the first page of this application agree to take full responsibility for and to bear the full cost of, immediate repairs or replacement of any and all item(s) on the property of the Association or the property of other that may be damages and/or destroyed, directly or indirectly, by the work anyone pursuant to this request, whether such damage is caused directly by the owner or indirectly by a contractor, agent, or employee of the owner.

ACCESS: I (we) the sole owner(s) of the property described on the first page of this application hereby acknowledge that member of, or agents for, the Board of Directors and/or the Architectural Control Committee shall have access pursuant to notice to the Property owner for the purpose of inspecting the work in progress and upon completion.

DISCLAIMER: I (we) the sole owner(s) of the property described on the first page of this application hereby acknowledge full and complete understanding that neither the Architectural Control Committee, nor the Board of Directors certifies compliance with any Building, Zoning, Health, Safety, of other codes or standards by its or their approval of any matter contemplated by this application and that additional approvals must be separately obtained, if applicable from all necessary agencies by the owner. Neither this Association nor its Officers, Directors, Architectural Committee or agents assume or shall have any liability for approval or disapproval or for death or injuries to person or property arising from construction or use of improvements or for loss to owners, economic or otherwise, arising from construction or use of said improvements.

Owner _____

Date: _____

Owner _____

Date: _____

Homeowner Association Documents allow thirty (30) days for the review process. Depending on the type of application and the date of submission, the Committee will endeavor to act on the application as expeditiously as possible.

Approvals are effective for ninety (90) days and work must be completed in a timely manner.

A few brief reminders: Work hours are 8:00 AM to 5:00 PM sharp. Be mindful of your neighbor’s property, and privacy during this time. We would like to make you aware that workers cannot post signs, pass out flyers, or bussiness cards while working in the community. Please mention to them that they are not to cruise throughout the community.

Thank you in advance for your cooperation.

INDEMNITY LETTER

(Unit Owner Name)

Date: _____

To Whom It May Concern:

I, the undersigned, agree to indemnify and hold harmless **FOREST LAKE ESTATES HOMEOWNERS ASSOCIATIONS, INC.**, from any and all liability, defense costs, including attorney fees and all other fees incidental to defense, loss or damage **FOREST LAKE ESTATES HOMEOWNERS ASSOCIATIONS, INC.**, may suffer as a result of claims, demands, costs or judgments against it arising from the work.

(Signature of Owner)

(Street Address)

(Print Name of Owner)

(City, State, Zip)

ACKNOWLEDGEMENT

STATE OF FLORIDA,
COUNTY OF _____

Before me personally appeared _____ to me well known and known to me to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that _____ executed said instrument for the purposes therein expressed.

NOTARY PUBLIC – STATE OF FLORIDA

MY COMMISSION EXPIRES

FOREST LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

OFFICE USE ONLY

Date Received: _____

Owner Name(s): _____

Address: _____

Job Description: _____

(Circle One)

APPROVED / DENIED

COMMITTEE MEMBERS (2)

Date: _____

Print Name: _____

Signature: _____

Date: _____

Print Name: _____

Signature: _____

Board Representatives (1)

Date: _____

Print Name: _____

Signature: _____

ACKNOWLEDGEMENT

Owner/tenant acknowledges that the **Rules & Regulations** of Forest Lake Estates. I/We have read them in full and thoroughly understand their intent and meaning and will abide by them. I also acknowledge and understand that **any exterior modification to the property MUST have association approval by submission of ARB complete packet** and that no work will be done prior to written approval from the associations board of directors.

Print Name

Signature

Date

Print Name

Signature

Date

Unit Address

Board Signature

Date: