ARCHITECTURAL CHANGE APPLICATION

C/O J&L Property Management, Inc 10191 W. Sample Rd. #203 Coral Springs, Fl 33065 Office: (954) 753-7966 Fax: (954) 753-1210 Www.jlpropertymgmt.com

REQUIREMENTS FOR SUBMISSION OF ARB FORMS

- Work cannot be started until you receive back the architectural form signed and approved.
- If you are doing the work yourself, put "Homeowner" next to "Contractor Name" on the <u>Architectural Change Application</u>. Only submit documents 1-4 that are listed below.
- Include one (1) copy of the documents listed below **WITH** your architectural request or it may not be accepted if it's incomplete.
- The unit owner is responsible for obtaining necessary permits required from the City.
- The unit owner is responsible for any and all damages to Association property and any utilities, including sewer, water, cable, electric and telephone.
- The unit owner must remove all debris off Association property from the work that is being done.
- Other conditions may be applicable and may be determined or stipulated on an individual basis.
- Please note: If you are part of a Master Association, you will be required to obtain approval from them as well prior to starting any work.

DOCUMENTS LISTED BELOW MUST BE SUBMITTED BACK WITH YOUR REQUEST:

- 1. Complete ARB form Fill in each box indicating colors, materials, and proposed work
- 2. Indemnity Letter NOTARIZED
- 3. A picture of the item/material that will be installed or used for your request (Windows, doors, paint samples, etc.)
- 4. A copy of the property Survey or a Site Plan indicating where and what the improvements are (If applicable)
- 5. A copy of the Contractor's License
- 6. A copy of the Contract detailing the work (does not have to show the price)
- 7. A copy of the Contractor's General Liability Insurance Certificate & Workers Comp Certificate or Exemption form. The General Liability Certificate and Workers Comp Certificate must be made out to your Association as follows:

PARKSIDE OF CORAL SPRINGS ASSOCIATION

c/o J&L Property Management, Inc. 10191 W. Sample Rd. #203 Coral Springs, FL 33065

Documents can be returned to J&L Property Management via Emailed, mailed or dropped off to our office. Below is the information for your records.

Email: Arcrequests@jlpropertymgmt.com

Mail: J & L Property Management, Inc. 10191 West Sample Rd., Suite 203 Coral Springs, FL 33065

ASSOCIATION NAME : PARKSIDE OF CORAL SPRINGS ASSOCIATION

Homeowner Name:	Email:
Address:	Phone #:
Contractor Name:	License #:
Address:	Phone #:

*Window Requirements: Only <u>single hung windows</u> are permitted, and all windows/sliding glass doors must have a <u>bronze colored frame</u>.

	List Materials To Be Used:	Type/Style:	Color
Roof:			
Painting Exterior Walls:			
Fascia:			
Patio Screen Encl:			
Privacy Fence:			
Driveway/Walk:			
Shutters:	# of Shutters		
Windows/Doors:	# of Windows: # of Doors:		
Other:			

OFFICE USE ONLY

The Architectural Drawings for improvements on the above lot have been reviewed by the Architectural Control Board and have been:

Comments:	Approved	Approved with CommentsDenied
	Comments:	
Chairman/Committee Member Date:	Chairman (Committee Morehon	Date:

INDEMNITY LETTER

(Unit	Owner	Name)	
(1,0000000	

Date: _____

To Whom It May Concern:

I, the undersigned, agree to indemnify and hold harmless **PARKSIDE OF CORAL SPRINGS ASSOCIATION** from any and all liability, defense costs, including attorney fees and all other fees incidental to defense, loss or damage **PARKSIDE OF CORAL SPRINGS ASSOCIATION** may suffer as a result of claims, demands, costs or judgments against it arising from the work.

(Signature of	Owner)		Street A	Address		
(Print Name c	of Owner)		City, S	tate, Zip	 	
		ACKNOWI	LEDGE	MENT		
STATE OF F	,					
Before me per		opeared				to me
	nd known and	to me to be the perso acknowledged	to	and	me	that
therein expres	ssed.				1	1

NOTARY PUBLIC – STATE OF FLORIDA MY COMMISSION EXPIRES