

JONATHAN'S COVE ASSOCIATION, NC
REQUEST FOR ARCHITECTURAL REVIEW

GRS Community Management, Inc.
3900 Woodlake Blvd., Suite 309 Lake Worth, FL 33463
(561) 641-8554 FAX: (561) 641-9448

Directions: 1. Fill in requested information. 2. Sign form. 3. Submit form and any additional documentation to:

DATE: _____ OWNER NAME: _____

PROPERTY ADDRESS: _____

EMAIL: _____ HOME #: _____ CELL #: _____

- A. Brief description: In the space below give a brief description of the alteration, improvement, addition, or other change you would like to make to the exterior of your unit (to avoid delays, be as clear as possible):
- B. Attach to this application the following checked items:

SURVEY/PLOT PLAN showing the location of the improvement.

OTHER

PLAN, ELEVATIONS or DETAILED SKETCH

PAINT COLOR CHIP

Description of modification to be completed: _____

HOMEOWNER'S AFFIDAVIT

I have read the Covenants and Restrictions of my Community Association and agree to abide by them. I understand and, in return for approval, I agree to be responsible for the following:

- For all losses caused to others as a result of this undertaking whether caused by me or others.
- To comply with all local building codes or permit requirements.
- For any encroachment(s).
- To comply with conditions of acceptance (if any).
- To complete the project according to the approved plans.

Signed _____ Date _____

APPROVED by the Association

APPROVED * Subject to the following conditions: _____
Project MUST begin within _____ days and completed in _____ days.

INSUFFICIENT INFORMATION
Resubmit on a new form. Be sure to include the following _____

NOT APPROVED _____

By: _____ Date: _____

By: _____ Date: _____