

SILVER GLEN AT CITRUS ISLES HOA
C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD. – SUITE 309
LAKE WORTH, FL. 33463
(561) 641-8554 / FAX (561) 641-9448
WWW.GRSMGT.COM

REQUEST FOR ARCHITECTURAL REVIEW

This form is to be used when requesting a modification, alteration, or addition to the exterior of your home or property. Approval is required on all items that are visible from the exterior of the home, whether previously completed or not. Please submit your request to GRS Management at the address above. Your Association Review Committee will review your request and return a copy to you with a letter of approval (or denial) and any necessary explanation.

OWNER'S NAME: _____
PROPERTY ADDRESS: _____
MAILING ADDRESS: _____
HOME PHONE: _____ ALTERNATE PHONE: _____
EMAIL ADDRESS: _____

DESCRIPTION OF MODIFICATION: PLEASE PROVIDE DETAILS TO INCLUDE TYPE OF MODIFICATION, MATERIALS TO BE USED, COLOR, SIZE, SHAPE AND LOCATION. LOCATION SHOULD ALSO BE MARKED ON SURVEY. _____

NOTE: APPROVAL OF ANY MODIFICATION, ALTERATION OR ADDITION DOES NOT WAIVE THE NECESSITY OF OBTAINING THE REQUIRED FEDERAL, STATE, COUNTY, CITY OR APPLICABLE AGENCY APPROVAL(S) OR PERMIT(S).

DATE OF REQUEST: _____ SIGNATURE _____

YOUR APPLICATION HAS BEEN APPROVED _____ DISAPPROVED _____
COMMENTS OR CONDITIONS: _____

REVIEW COMMITTEE SIGNATURE _____ DATE _____

**IF WORK IS BEING DONE BY A CONTRACTOR WE ALSO
NEED THE ITEMS BELOW.**

1. Copy of the contractor's occupational license
2. Copy of the contractor's proposal and sketch of work to be done.
3. The certificate of insurance for **general liability** and **workers compensation**, please be sure the certificate holder on the bottom left reads the following:

**Silver Glen at Citrus Isles HOA
C/O GRS Management Associates.
3900 Woodlake Blvd Suite 309
Lake Worth, FL 33463**

****If your contractor is exempt from workers compensation
please provide exempt document.**