



**PELICAN CAY HOMEOWNERS ASSOCIATION, INC.  
ARCHITECTURAL CONTROL COMMITTEE  
FOR PAINT & HURRICANE SHUTTER MODIFICATIONS ONLY  
FORM "A" – MODIFICATION FORM**

Owner's Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
 Acct #: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_

The Pelican Cay Architectural Control Committee (ACC) meets as required in the Conference Room. **You must submit your completed Modification Form package, addressed to the Pelican Cay HOA, to the LABR HOA Office or drop in the green box outside the LABR office.**

Please submit 2 (Two) sets of your Modifications Form package to the Pelican Cay Homeowners Association. If you have any questions, please reach Pelican Cay HOA at **561-372-4625** and leave a message; a board member will return your call within 24/48 hours, or e-mail us at: [nicolas@2Albion.com](mailto:nicolas@2Albion.com)

**An approval or denial of your request will be provided to you within 30 days of receipt of your completed Modification Form package. Once it is approved or denied, you will be notified in writing of such decision. If the application has been approved, the application will be submitted to the LABR ACC.**

**SECTION 1: DESCRIPTION OF PAINT MODIFICATION**

	For <b>ALL</b> items, complete existing colors	Complete ALL items. Include paint brand and color number	
Base	_____	Brand: _____ N <sup>o</sup> : _____	<b><i>You cannot choose a color that is the same as the house on either side of your house. When facing your house from the street:</i></b>
Accent	_____	Brand: _____ N <sup>o</sup> : _____	
Driveway	_____	Brand: _____ N <sup>o</sup> : _____	Color of the house to your right:
Front Door	_____	Brand: _____ N <sup>o</sup> : _____	_____
Garage Door	_____	Brand: _____ N <sup>o</sup> : _____	_____
Roof	_____	Brand: _____ N <sup>o</sup> : _____	Color of the house to your left:
Trim	_____	Brand: _____ N <sup>o</sup> : _____	_____
Walkway	_____	Brand: _____ N <sup>o</sup> : _____	_____

A two-foot square sample of the proposed base and trim colors must be painted on the front of your house for inspection by the Architectural Control Committee before your color choices can be approved. A sample of each proposed color painted on a 8" x 11" sheet of paper must be attached to your application.

Purple, red, orange, black, blue, hot or bright pink, bright green and chocolate brown are prohibited colors; pure white is also prohibited as a base color, but may be used as a trim color. Other colors may be rejected by the ACC, if deemed incompatible with community norms, including the particular streetscape of your neighborhood.

Pelican Cay Homeowners Association, Inc.  
 Mailing address:  
 Albion LLC  
 c/o Pelican Cay HOA Inc.  
 1101 S. Rogers Circle, Suite 4  
 Boca Raton, Florida 33487  
[Nicolas@2Albion.com](mailto:Nicolas@2Albion.com)  
 Phone# 561-372-4625



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**SECTION 2: DESCRIPTION OF HURRICANE SHUTTERS MODIFICATION**

House Color: Base \_\_\_\_\_ Trim \_\_\_\_\_ Aluminum Window \_\_\_\_\_

Shutters: Type \_\_\_\_\_ Material \_\_\_\_\_ Color \_\_\_\_\_

a. # of total windows in the property: \_\_\_\_\_ b. # of windows shutters will be installed \_\_\_\_\_

c. if shutters will not be installed on all windows please explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**! Please provide with an image or drawing of shutters model**

The following information must be provided with regards to the contractor who will perform the modification alteration:

Contractor name: \_\_\_\_\_ Contractor Telephone Number: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

**You must also provide proof of your contractor’s current general liability insurance and workers compensation as required by the State of Florida. You must provide your contractor’s current valid and active State of Florida license.**

**The Association rules require it be named as an additional insured on contractor’s insurance policies. If modifications require access via the Common Area, a security deposit of \$1000.00 against damages to the common elements is to be provided to the Association prior to commencement of any work.**

I, \_\_\_\_\_ residing at \_\_\_\_\_

\_\_\_\_\_, hereby make an application for approval, pursuant to the regulations of my Association, for the architectural changes above.

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If said approval is granted, I agree to comply with the conditions stipulated on this form. I also hereby agree to obtain all permits required from the appropriate authorities.

I further understand Pelican Cay Homeowners Association, Inc. may prosecute me should I fail to comply with their covenants and restrictions.

Please be aware this application is valid for sixty (60) days after LABR HOA ACC approval, otherwise a new application will need to be submitted. This application has been read and understood.

**PLEASE DO NOT COMMENCE ANY WORK UNTIL YOU RECEIVE  
 WRITTEN APPROVAL OF YOUR MODIFICATION REQUESTS FROM PELICAN CAY & LABR.**

Owner's Signature ..... Printed Name ..... Date ..... / ...../.....

**Do Not Write Below this Line**

\_\_\_\_\_ Approved by Pelican Cay ACC      \_\_\_\_\_ Pending, insufficient information. Resubmit requested information.  
 \_\_\_\_\_ Denial, not approved for the following reason: \_\_\_\_\_

Signature ..... Printed Name ..... Date .../.../.....  
 Pelican Cay HOA

Signature ..... Printed Name ..... Date .../.../.....  
 Pelican Cay HOA

Signature ..... Printed Name ..... Date .../.../.....  
 Pelican Cay HOA

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