

LAKEVIEW ESTATES HOMEOWNERS ASSOCIATION, INC.
c/o GRS Community Management
3900 Woodlake Blvd. Suite 309, Lake Worth, FL 33463
Website: www.grsmgt.com
Email: residentservices@grsmgt.com

**ARCHITECTURAL COMMITTEE APPROVAL FORM
FOR ALTERATIONS AND LANDSCAPING CHANGES**

Owner's Name: _____ Date: _____

Property Address: _____ Lot No.: _____

Phone No.: _____ Email: _____

DESCRIBE, IN DETAIL, TYPE OF ALTERATION AND MATERIALS TO BE USED ON PAGE 2. Exterior building alterations **MUST BE ACCOMPANIED BY A COPY OF YOUR LOT SURVEY INDICATING LOCATION, SIZE AND TYPE OF CONSTRUCTION, AND OTHER PERTINENT INFORMATION.** Landscape alterations must include a drawing of the location and a description of materials used. Paint ARC's must include pictures of the paint that you have selected for each body type. Roof ARC's must include a color photo of the front of your home.

If approval is granted, it is not to be construed to cover approval of any County code requirements. A building permit from the Palm Beach County Building Department is needed for most property alterations or improvements. All changes must conform to existing community By-Laws (available on website above).

As a condition precedent to granting approval of any request for a change, alteration or addition to an existing basic structure, that the applicant, the heirs and assigns thereto, hereby assume sole - responsibility for the repair, maintenance or replacement of any such change, alteration, or addition.

It is understood and agreed that the ASSOCIATION, et al are not required to take any action to repair, replace or maintain any such approved changes, alteration or addition, or any damage resulting there from for any reason to the existing original structure or any other property. THE HOMEOWNER ASSUMES ALL RESPONSIBILITY AND COST FOR ANY ADDITION OR CHANGE, AND ITS FUTURE UPKEEP. Also, the homeowner acknowledges that the Association and management company will be held harmless from any liability arising there from; and indemnify them for all losses, costs, expenses and attorney's fees in connection with any such addition to their home or surrounding area.

Type of work being done: _____

Permit # (attach a copy of permit): _____

Drawing: _____

Contractor Name(s): _____

Phone No.: _____ License No: _____

Liability Insurance Policy No.: _____

Name of insurance Company: _____

Carrier's Phone Number: _____

Workers' Comp. Insurance Policy No.: _____

Name of Insurance Company: _____

Carriers Policy Number: _____

Please attach one (1) copy of all documents to this Approval Form.

Application must be fully completed before submitting, failure to do so may result in application being returned incomplete.

Thank you for your cooperation.

Signature of Owner

ARCHITECTURAL COMMITTEE:

ACTION BY THE ASSOCIATION: _____ (APPROVED) _____ (NOT APPROVED)

DATE: _____

Signature of Architectural Chairman