

3900 Woodlake Blvd., Suite 309, Lake Worth, FL 33463 Ph: (561) 641-8554

PALM ISLAND VILLAS AT WILTON MANORS HOMEOWNERS' ASSOCIATION, INC. REQUEST FOR ARCHITECTURAL CONTROL APPLICATION

Alternate Number:
I via mail or hand-delivery to GRS at the address indicated above.
_ Homeowner or Licensed Contractor
n which you are seeking approval:

Please complete and sign this form and attach the following information, if applicable.

- 1. Application Processing Fee of \$25.00 payable to GRS Community Management in the form of money order or cashier's check.
- 2. Copy of contractor proposal and sketch of work to be done.
- 3. Copy of contractor's occupational license.
- 4. Copy of contractor's liability and automobile insurance certificate naming 'Palm Island Villas at Wilton Manors Homeowners' Association' (in c/o GRS Community Management at the above referenced address) as the Certificate Holder and as Additional Insured and a copy of Workman's Compensation Insurance Certificate.
- 5. Copy of homeowner's property survey indicating location of changes or modifications.
- 6. Copy of Permit Application(s) and sign off when completed for all applicable modifications.

Materials you may need to provide to the Association for the approval of the requested changes/modifications.

- 1. A picture, drawing or advertising materials displaying the items you are requesting for installation.
- 2. A sample of the type and texture of any building materials that may be used on the house exterior.
- 3. A sample of the color of paint or other materials that may be used on the house exterior.
- 4. Any other materials or information that may assist in Association evaluation of the project.
- 5. A site plan showing your lot, the location of your home on the lot, and where the changes will be made.
- 6. If the Architectural Control Committee and/or Board of Directors fails to approve or to disapprove such plans or to request additional information reasonably required within thirty (30) days after submission, the plans shall be deemed approved.

It is understood that the changes or modifications which you are requesting may not:

- 1. Interfere with or obstruct any easements on your property or the adjoining property.
- 2. Cause a nuisance or interference with the peace or privacy of the other people in the community.
- 3. Be performed by unlicensed contractors or without the required permits from all governmental agencies.
- 4. Contractors are permitted to work Monday through Friday. Work may NOT commence prior to 9:00 a.m. or after 5:00 p.m. Monday through Friday. Work on Saturday and Sunday is permitted if no noise will be audible beyond the unit the work is being performed.

Homeowner(s) Signature:	Date:
Approved Conditionally Approved	Disapproved
Committee or BOD Authorized Signature:	Date

HOMEOWNER'S AFFIDAVIT:

I/we have read, understand, and agree to abide by the Declaration of Covenants and Restrictions for Palm Island Villas at Wilton Manors Homeowners' Association and to abide by them. I/we understand and, in return for approval, I/we agree to be responsible for the following:

- For all loses caused to others, including common areas, because of this undertaking, whether caused by me or others.
- To comply with all state and local building codes.
- For any encroachment(s).
- To comply with the conditions of acceptance, (if any); and
- To complete the project according to the approved plans. If the modification is not completed as approved. Said approval will be revoked and the modification shall be removed by the owner at the owner's expense.
- Applicant further acknowledges drainage swales have been designed and established between homes (side yard) to carry storm water and maintain positive drainage away from home. The Association and/or Developer shall not be responsible for any installation of proposed landscaping, or any other improvements may have on drainage. The applicant shall be responsible for all associated costs incurred to restore drainage and/or landscaping to original condition.

I/we also understand the ACC Committee/BOD does not review and assumes no responsibility for the structural adequacy, capacity or safety features of the proposed construction, alteration, or addition, or for performance, workmanship, or quality of work of any contractor or of the completed alteration or description.

I/we agree to abide by the decision of the Architectural Control Committee and/or Board of Directors. If the modification is not approved or is not in compliance, I/we may be subject to court action by the Association. In such event, I/we shall be responsible for all reasonable attorney's fees.

Homeowner(s) Signature:	Date:
Drint Name:	

PALM ISLAND VILLAS AT WILTON MANORS HOMEOWNERS' ASSOCIATION, INC.

ARCHITECTURAL CONTROL COMMITTEE APPLICATION

CODES:

Please be advised this Request for Architectural Modification approval is s permit conditions required.	ubject to County Codes, setbacks, and
If at a later point it is found the unit owner(s) has not complied with these pheld responsible for any and all changes that would be required.	procedures, the Homeowner(s), will be
Homeowner Signature:	Date:
Print Name:	
DISCLAIMER/RELEASE:	
The Palm Island Villas at Wilton Manors Homeowners' Association's Board of Committee Members or their representative and the Management Companiandscaping or damage incurred by any homeowner's vendors/contractors paid property.	y will not be held responsible for any
If requested, a copy of the Broward County Building Permit and/or a Broward will be provided to the Property Management Company prior to the installa Also, if requested, a copy of a signed County Inspection Approval will be pro-	tion or construction to said property.
At any time, the ACC Committee, the Board of Directors of the Association a Company may ask for same documents and has the right to demand said instremoved immediately at owner's expense if said modification is not what w Board of Directors, or the Property Management Company.	stallation and/or construction be
Homeowner(s) Signature:	Date:
Print Name:	