Las Brisas Architectural Review Request Form

Owner I	Name(s)			
Unit Nu	mber	Telephone	E-mail	
	(
Contrac	tor Name		Telephone	
			E-mail	
Declarate changes herein, to further	tion of the Las s above noted to the improve understand th	Brisas Homeowners As and if said approval is g ment requirements of the	sociation, Palm Beach Co granted, I agree to comply e Town of Hypoluxo, and t sible by the Association sl	s, guidelines, by-laws and unty, Inc. for the architectural with the conditions stipulated to obtain all permits required. nould I fail to comply with its
APPLICA	ANT SIGNATU	RE		DATE
				Il the following documentation:
		Architectural Review Re		
	all modification	ons, additions, or alterat	tions.	size, materials, and location of
			at ground level, if requested	
4.	NOTE: The	d sufficient liability and v liability insurance certi	workers comp insurance (i	Brisas HOA, c/o GRS, 3900
5.	Proof of ownsite, a warrar	ership, either a property ty deed, or closing state	record from Palm Beach (County Property Appraiser web
	Submit the co	mpleted application and	d documents to: resident	services@grsmgt.com
will vote	to either acce	pt or reject the ARC's de	If ARC approves your applecision at the next HOA ments are Board of Directors at the	ication, the Board of Directors eeting. If the ARC rejects your e next HOA meeting.
ARC DE	CISION: { }	APPROVED { } [DENIED	
ARC SIG	NATURE:			DATE:
				DATE: