

THE ANCHORAGE AT MIAMI LAKES HOMEOWNERS' ASSOCIATION

ARCHITECTURAL MODIFICATION FORM

Lavin Property Management
2300 W 84th St, Suite 312,
Hialeah FL 33016
Tel: 786.516.9915

Date: _____

Owner's Name: _____

Property Address: _____

Account Number: _____ Phone: _____

Architectural Review Board (ARB) approval is required before commencing any improvements in your property. If work has begun, you should stop immediately until obtaining an approval from the ARB.

Your approval will be based on the Architectural guidelines as set forth in the Association's Documents.

Owner's Responsibilities:

1. Specifications of the proposed modification(s) including color, design, materials, dimensions, and location of modification with color brochures and/or paint samples.
2. Owners are responsible for obtaining any necessary permits from the appropriate Building and Zoning Department(s) and/or the Town of Miami Lakes after receiving ARB approval.
3. Access to areas of construction is only allowed through your property, any damage to the common area/elements by the owner's vendors during construction will be the responsibility of the owner.
4. Contractors and vendors are only allowed in the property from 8:00 a.m. to 6:30 p.m. Monday through Friday and 8:30 a.m. to 5:30 p.m. on Saturdays. No vendors are allowed on Sundays or holidays.

The owner is responsible for complying with the applicable Laws of the City, County and State including license and insurance. It is also the owner's responsibility to make sure that all vendors contracted for he job have the proper current worker's compensation and general liability insurance.

I/We understand that approval of our request must be granted by ARB before I/We can have the job started. I/We also acknowledge that we could be compelled to have the item removed or changed if it is completed without prior approval. Furthermore, if the modification(s) are not completed as approved, said approval will be revoked and the modification(s) will be removed at the owner's expense. I/We hereby request to make the following modification(s), alteration(s), or addition(s) as describe below on the additional attached pages:

_____ Driveway _____ Landscaping _____ Painting _____ Roof

Other: _____

Color samples (pictures, brochures, etc.) must be included on the attached page.

Job Started? Yes () No ()

Date: _____ Signature of Owner: _____

Architectural Review Board (ARB) has 30-45 days to process this application.

Date Application Received: _____ Date of Approval/Disapproval: _____

() Approved () Disapproved

ARB Signature: _____ ARB Signature: _____ ARB Signature: _____

Explanation of Disapproval: _____

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Sample Form:

_____ Driveway

_____ Landscaping

_____ Painting

_____ Roof

Notes:
