



Office Use Only

Subdivision _____

Lot/Building: _____ Unit: _____

Rec'd by: _____ Date: _____

Indian Spring Master Association Request for Architectural Review Committee

Date: _____

Name: _____

Local Address: _____

Local Phone Number: _____

Other Address: _____

Email: _____

PLEASE RETURN BOTH COPIES TO THE OFFICE
REQUESTS ARE AUTOMATICALLY CANCELLED AFTER 45 DAYS

Brief description of addition, alteration, improvement, etc.:

Contractor's Name: _____ Phone Number: _____

Email: _____

This Portion for Office Use Only

Certificate of Liability Insurance

Certificate of Workers' Compensation

Certificate of Exemption of Workers' Compensation

Permit

Homeowner's Affidavit

I have read the covenants and restrictions of both my association and the Indian Spring Master Association and agree to abide by such covenants and restrictions. No work will be commenced without the approval of both my Association and Indian Spring Master Association. Homeowner shall be responsible to correct any damage caused as a result of work done.

Signed: _____ Date: _____

For Association Use Only

Approved by HOA or Condo

Preliminary approval subject to review of ISMA

Insufficient information submitted – resubmit

Not approved

Comment: _____

Association Agent: _____ Date: _____

Approved Indian Spring Master Association

Insufficient Information

Not Approved (noted)

ARCHITECTURAL CONTROL COMMITTEE
 INDIAN SPRING MASTER ASSOCIATION, INC.

Comment: _____

ISMA Agent _____ Date _____

Indian Spring Master Association approval is subject to homeowner meeting all the requirements of the Palm Beach County Building & Zoning Department.



Per the Board of Directors of Indian Spring Master Association, Inc., please have your insurance carrier issue the certificate holder as shown below:

| CERTIFICATE HOLDER | CANCELLATION (see below) |
|--|--|
| <p><i>Indian Spring Master Association, Inc 5995 Bannock Terrace Boynton Beach, Fla 33437</i></p> | <p>Should any of the above-described policies be cancelled before the expiration date thereof, none will be delivered in accordance with the policy provisions</p> |

Required documentation to work within Indian Spring or any of its Community's:

- I. Certificate of Liability Insurance
- II. Worker's Compensation Liability or Certificate of Exemption
- III. Palm Beach County Permit (if applicable)

Architectural applications will remain open for no longer than forty-five (45) business days.

Once the deadline has been met, the application will be considered cancelled, and a letter will be sent to you.

If there are any extenuating circumstances causing delays for permitting or any other unforeseen conditions, please advise the Association office immediately so they may act accordingly.

Thank you for your cooperation.

- Board of Directors
Indian Spring Master Association

In lieu of filling out an on-line ARC, owners may also submit a paper version by filling out the highlighted portion of the form below. Please note that **NO ARC WILL BE ACCEPTED WITHOUT THE VENDORS INSURANCE INFORMATION AND WORKMANS COMP POLICY BEING ATTACHED.**