

Atlas Property Management Services, Inc.

1500 NW 89 Court, Suite 202 Doral, Fl 33172 Tel: 305-715-2801 Fax: 305-715-2802 www.apmsi.com

THIS FORM TO BE USED WHEN REQUESTING A CHANGE INSIDE/OUTSIDE OF YOUR HOME

REQUEST FOR REVIEW FOR ARCHITECTURAL MODIFICATION

OLD CUTLER GLEN HOMEOWNERS ASSOCIATION, INC Atlas Property Management Services, Inc. 1500 NW 89 Court, Suite 202 Doral, Florida 33172

Owner's Name:			
Block	Lot	Address:	
Day Phone:		Evening Phone:	
Cell Phone:		E-Mail	
		CATION THE FOLLOWING MUST BE ATTACHE	D:
		osed modifications drawn on the survey.	
		th a Plan View and an Elevation.	
3. Specifications of the pr	oposed modifica	ations (example: color, style, etc.)	
additional attached pages		0	
Date:	Signature of C	Jwner:	
		FOR BOARD OF DIRECTORS USE ONLY	
Date: Application Received	d	Approved or Disapproval	
Approved	_ Disapproved _		
Your approval is subject to		(Board of Director Signature)	
 You are responsible for Access to areas of const 	obtaining any neor	cessary permits from the appropriate Building and Zoning to be allowed through your property, and you are responsition. (Including the roads and gates by contractor or third	ble for any and all damage done to the
Explanation of Disapp	roval:		
			