

## REQUEST FOR ARCHITECTURAL REVIEW

**Colee Hammock East Homeowner Association**  
c/o JMA Community Management

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Please only start projects after written approval is received.

Date \_\_\_\_\_

**To: Association Management**

Unit Owner \_\_\_\_\_ Unit # \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ EMAIL \_\_\_\_\_

**Describe in detail** the modification action being requested. **REQUIRED ATTACHMENTS: Photos, Drawing, Scope of Work**

\_\_\_\_\_  
\_\_\_\_\_

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Will this work be PERMITTED? YES \_\_\_\_\_ NO \_\_\_\_\_

I have read the Covenants and Restrictions of my Community Association and agree to abide by them. I understand and, in return for approval, I agree to be responsible for all losses caused to others as a result of these tasks, to comply with all local building codes or permits requirements, to complete the project according to the approved plans, and to keep sidewalks, streets, common area free of dirt, debris daily. I will be responsible for any cost associated with clean-up if the association is required.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Contractor/Vendor Documentation and information is REQUIRED for all approvals.**

Name of Company/Contractor \_\_\_\_\_

Address \_\_\_\_\_ Phone# \_\_\_\_\_

Copies of: \_\_\_\_\_ Certificate of Liability Insurance \_\_\_\_\_ Plan or Detail Sketch  
\_\_\_\_\_ Workers Compensation Liability \_\_\_\_\_ Contractor's Scope of Work  
\_\_\_\_\_ State of Florida Professional License  
\_\_\_\_\_ Palm Beach County Business Tax Receipt LBTR

Notice of Acceptance and Product Specifications may be **Required** for Windows, Exterior Doors, and Storm Shutters. **These items may require a Notice of Commencement from the Building Department.**

**ASSOCIATION and Management Company MUST Be Listed as Certificate Holder.**

Colee Hammock East Homeowner Association  
JMA COMMUNITY MANAGEMENT

**DO NOT SUBMIT AN APPLICATION UNLESS ALL INFORMATION REQUESTED IS INCLUDED**

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