REQUEST FOR ARCHITECTURAL REVIEW

Waterway Club No.1 Association

c/o JMA Community Management

Please only start projects after written approval is received.	
	Date
To: Association Management	
Unit Owner	Unit #
Address	
Phone # EMAIL	
<u>Describe in detail</u> the modification action being requested. <u>REQUIRED ATTACHMENTS: Photos, Drawing, Scope of Work</u>	
Will this work be PERMITTED? YES NO	
return for approval, I agree to be responsible for all losses cabuilding codes or permits requirements, to complete the proj	y Association and agree to abide by them. I understand and, in used to others as a result of these tasks, to comply with all local ect according to the approved plans, and to keep sidewalks, nsible for any cost associated with clean-up if the association is
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 <u>Required</u> for Windows, Exterior Doors, and Storm Shutters. <u>These items may require a Notice of Commencement from the Building Department.</u>

ASSOCIATION and Management Company MUST Be Listed as Certificate Holder.

Waterway Club No.1 Association JMA COMMUNITY MANAGEMENT

DO NOT SUBMIT AN APPLICATION UNLESS ALL INFORMATION REQUESTED IS INCLUDED
