

CYPRESS BEND CONDOMINIUM IV ASSOCIATION INC

c/o J& L Property Management, Inc.
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Coral Springs, FL 33065
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Veronica@jlpropertymgmt.com

ARCHITECTURAL CHANGE REQUEST FORM

Unit Owner Name: _____ BLDG#: _____ UNIT#: _____
Owner Phone Number: _____
Additional Information if needed: _____
Contractor: _____ License #: _____
Business Address: _____ Phone #: _____

Major alterations to the Interior of your unit and any anticipated changes to the Common Area you do must be Approved by the Association via this form with proof of Contractor being Licensed and Insured PRIOR TO ANY WORK BEING PERFORMED.

See Rules & Regulations Revised: June 18, 2020 for further clarification. The most common is flooring, the underlayment and soundproofing, whether Tile or Laminate must be verified as properly installed. Windows, Screen Doors, and Landscaping are several other items that require this form. If you are in doubt, contact Veronica@jlpropertymgmt.com. Better to be safe than sorry as the Association is very strict regarding changes that do not promote the welfare of the community or conform to the existing esthetics.

ARCHITECTUAL CHANGE REQUEST: _____

Material/Type/Color: _____

Owner Signature & Date Requested: _____

The Change Requested Has Been: **APPROVED** _____ **DENIED** _____

Approval Comments/Conditions: _____

Authorized Board, Management or Maintenance Signature Date

Print Name

POST APPROVAL ON KITCHEN WINDOW DURING WORK