



EXCLUSIVE PROPERTY

MANAGEMENT GROUP

Any homeowner wishing to make an additional/ alteration to the outside of a parcel **must** complete and return this form.

- ❖ **WORK MAY NOT COMMENCE UNTIL THIS FORM HAS BEEN APPROVED IN ACCORDANCE WITH THE ASSOCIATION DOCUMENTS**
- ❖ All improvements must be completed within three (3) months of approval date.
- ❖ A copy of all Dade County permits is to be provided for association files.

Name of Owner: _____ Account Num.: _____

Property Address: _____ Balance: \$ _____

Day phone: _____ Community Name: _____

Approval is hereby requested for the following modification(s), and/or modifications as described below and/or on attached pages. Please indicate below what type of changes or alterations you wish to make. **Be specific**; indicating what type of material, color, shape, style, dimension, etc. In order to process this, request the following must be attached:

1. A photograph of your house where proposed changes will take place
2. A copy of the site survey with proposed modifications drawn on the survey showing both plain view and elevated view & specifications of the modification.

For doors, windows, hurricane panels and shutters a copy of the Miami-Dade County Product Control Approval or Notice of Acceptance is **needed**.

Select all that apply ():

- | | |
|--|---|
| <input type="checkbox"/> Addition | <input type="checkbox"/> Patio |
| <input type="checkbox"/> Doors | <input type="checkbox"/> Play Structure |
| <input type="checkbox"/> Outdoor Lighting | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Roof: Identical |
| <input type="checkbox"/> Awning | <input type="checkbox"/> Roof Repairs |
| <input type="checkbox"/> Gutters | <input type="checkbox"/> Satellite 18"/ Antenna |
| <input type="checkbox"/> Basketball Hoop | <input type="checkbox"/> Screen: Identical |
| <input type="checkbox"/> Exterior Plant | <input type="checkbox"/> New Screening/ Enclosure |
| <input type="checkbox"/> Garage Door | <input type="checkbox"/> Solar collectors |
| <input type="checkbox"/> Hurricane Shutters | <input type="checkbox"/> Window treatment |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Wall Fence |
| <input type="checkbox"/> Iron, metal or similar bars | <input type="checkbox"/> Other: _____ |

Is this a re-submittal?:

- Yes
- No

Is this in response to a violation? :

- Yes
- No

Anticipated date of commencement

Time for completion of Improvement

Contractors/ Owners Signature

