VILLAGE OF DORAL GREENS HOMEOWNERS ASSOCIATION, INC.

ARCHITECTURAL CONTROL GUIDELINES

In order to maintain the high standard of Village of Doral Greens the Architectural Control Board must give <u>written</u> <u>approval</u> for all alterations, additions, improvements and landscaping.

- 1. No building, exterior, wall, fence or other exterior structure shall be commenced, erected or maintained without written approval from the Board of Directors.
- 2. You can only paint the exterior of your home in a color authorized by the Association and you must written approval from the Board of Directors prior to beginning painting.
- All modification of the landscaping must be submitted with plans that include specifications showing the nature, kind, shape, height, materials and location of landscaping improvements.
 - 4. Any and all changes to your front walkway or driveway or addition to your back patio must be submitted in writing for approval.

The application must be submitted with the following information:

- 1. A detailed plan or drawing with dimensions. An architectural rendering is not necessary, but it is preferable.
- 2. Letters from each adjoining homeowner(s) affected by the change <u>must</u> be included.
- 3. Samples of color, tile, brick or other materials being used.
- 4. Copy of License and Insurance for your contractor must accompany this application. The association must be named Additional Insured on the Certificate of Insurance and it must indicate that there is coverage for Workmen's Compensation.

You are responsible for obtaining any required building permits from the City of Doral and / or Miami-Dade County Building Dept.

For further information, consult your Association Documents.

The attached **ARCHITECTURAL MODIFICATION REQUEST FORM** must be used. **NO OTHER FORM WILL BE ACCEPTED** by the Architectural Control Board. Please submit completed form and any attachments to the management company.

THE BOARD OF DIRECTORS
VILLAGE OF DORAL GREENS HOMEOWNERS' ASSOCIATION, INC.

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ARCHITECTURAL MODIFICATION REQUEST FORM

| Owner's Name: | Tel: |
|---|---|
| Address: | |
| Email: | |
| Sketch of propose Appropriate drawing Specifications of the Copy of contract | pplication, the following must be included: ed modifications, ngs showing both a plan view and an elevation, he proposed modifications (color, style, etc.) tors License and Certificate of Insurance naming the dditional insured. Workmen's Comp insurance must be |
| • | ested to make the following modification(s), alteration(s) or below (attach additional pages if needed): |
| | |
| | |
| | |
| | |
| Owner's Signature: | Date |
| Date received: Your app • You are responsi Doral Building Dep • You are respons construction. • All construction dep | BOARD OF DIRECTORS USE ONLY Date approved/disapproved: proval is subject to the following: ble for obtaining any necessary permits from the City Of pt. and / or Miami-Dade County Building Dept. ible for any damage done to common elements during ebris must be removed within 48 hours of completion. anation: |
| BOARD OF DIRECTOR | S (Signed) |

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