

Architectural Modification Request

Owners Name: _____ Community Name: _____

Property Address: _____

Owners Contact Number: _____ E-Mail _____

Date of Request: _____ Reason for Request: _____

Please explain below what type of change(s) you are requesting approval for. Please include/attach as much information as possible, including but not limited to: Paint samples, picture of product, copy of proposal or specifications for work to be done. If installing a fence or completing structural changes a copy of your property survey indicating the location of installation/changes is required.

Work MAY NOT proceed until approval is issued for the improvement(s) requested. Requests may take up to 30 days for processing.

Signature of Owner

Approved by Tracey Schnaitman,
Property Manager on behalf of Association

Date

Please submit all information to: VIP Property Management Specialists, Inc.
2531 Aragon Blvd.
Sunrise, Florida 33322
(954) 748-6182 – Fax (954) 748-6546
vip_mgmt@bellsouth.net