RIVER BRIDGE PROPERTY OWNERS ASSOCIATION ARB MODIFICATION COMMITTEE

100 RIVER BRIDGE BLVD, WPB FL 33413 PHONE (561) 968-6054 / FAX (561) 968-1389

THIS FORM IS TO BE USED WHEN REQUESTING A MODIFICATION, ALTERATION OR ADDITION TO THE EXTERIOR OF YOUR HOME OR PROPERTY THAT IS VISIBLE. Request should be directed to your individual Island Condominium, Homeowners or Community Association. Your association will review this request to make sure it is in compliance with its documents, complete the sub-association section, and forward to the POA ARB Committee with their comments. If you should have any questions, please call 968-6054 or your local Modification Chairperson.

have any questions, please call 908-0004 of your local floating and	
OWNER'S INFORMATION	
OWNER'S NAME:	_ SUB-ASSOC
ADDRESS:	
CITY/ST/ZIP:	WUKK#:
MAILING ADDRESS, IF DIFFERENT FROM ABOVE:	
APPROVAL IS HEREBY REQUESTED TO MAKE THE FOLLOWING MODIFICAT DEPICTED BELOW. (Please include such details as the nature, kind, shape, color, size, ma copy of your survey is required on any type of construction). PLEASE INCLUDE PAINT NUM	
	DATE
OWNER'S SIGNATURE	VALU
TO BE COMPLETED BY SUB-ASSOCIATION	
APPROVED IN COMPLIANCE WITH OUR H.O.A. MODI	FICATION STANDARDS
DISAPPROVED COMMENTS:	
SIGNATURE OF SUB-ASSOCIATION REPRESENTATIVE	DATE
Board of Directors Delegate (Modification Committee Chairperson)	
TO BE COMPLETED BY ARB COMMITTEE	
APPROVED COMMENTS:	
DISAPPROVED	
APPROVAL OF ANY MODIFICATION, ALTERATION OR ADDITION REQUIRED FEDERAL, STATE, COUNTY, CITY, OR APPLICABLE AGENC	DOES NOT WAIVE THE NECESSITY OF OBTAINING THE CY APPROVAL (S) OR PERMIT (S).
	DATE
SIGNATURE OF ARB COMMITTEE (Board of Governors Delegate)	DATE

WAIVER OF LIABILITY

Print Name	(hereinafter "Owner") of
	Greenacres, FL (Unit/Address), (hereinafter to the
Board of Director	(hereafter "Association"), and seeks
approval for said addition, change, or alternation	n to the above-mentioned unit.
All such work shall be completed in good ar laws, ordinances, rules, regulations and requ	xpenses in the addition, change or alteration of said Unit. ad workmanlike manner in accordance with all applicable airements of all governmental bodies or officers having work is commenced, all required permits and authorizations
damaged by subcontractors, material men, med said Unit upon notice of the Master Association days of substantial completion of the review. I thirty (30) days written notice, Master Associated assessment against the Unit for said costs and	ges to repair or replace any portion of the common areas hanics or other third parties rendering goods or services to on Board and Sub-Association Board within forty-five (45) in the event that said costs and expenses are not paid within ation and/or Sub-association shall have the right to levy an expenses. The Association shall have all remedies for non-limited to lien rights, as further contemplated in the
including without limitation, aesthetic reasons,	n approval or disapproval will be based on any ground, to maintain and protect the value of property within River and engineering options on said plans from respective rely on the Association for these opinions.
caused by or arising from any acts, which may or common areas and any loss, claim or dan person or property, including common areas of addition, change or alteration to the Unit, occa any contractor, or any other third party rendering made a party to any litigation commenced again	free and harmless from and against any and all liability increase the susceptibility to loss on the described property nage by reason of any injury, accident or damage to any if the Association arising out of or in any way relating to the asioned wholly or in part by any act or omission of Owner, ng goods or services. In the event that Association shall be inst Owner concerning addition, change or alteration to the old Association harmless and pay all attorney's fees, costs ith such litigation.
	nforcement, or interpretation of this Waiver of Liability, able attorney's fees, including appellate and post-judgment
The WAIVER OF LIABILITY has been executed	d on the day of

WITNESS:

PLEASE FILL OUT AFTER COMPLETION OF WORK AND RETURN IT TO RIVER BRIDGE POA, ALONG WITH A COPY OF YOUR PERMIT

RIVER BRIDGE SUB-ASSOCIATION

FORM OF COMPLIANCE

It is the desire of the Master Architectural Review Board (ARB), to seek compliance with the Architectural Standards, Rules & Regulations of the community of River Bridge and/or the City of Greenacres, to have this form completed by the individual homeowner and signed off by the Sub-association Modification Board, **after completion** of modification performed. It is important to note that approval must come from the Master ARB, in order to obtain permits from the City of Greenacres.

Before any work is to commence, any project requiring a permit from the City of Greenacres, **must** be submitted to the ARB for approval. **No permit will be issued without prior ARB approval.** This certificate of compliance, must also be completed, documented, inspected, and approved, substantiating modifications were completed, in compliance with original modification submitted.

Pate:	Name of Sub-Association:
Name of	
Unit Owner:	
Address:	
Addiess.	
Phone:	Permit No:
ignatures of two (2)	Sub-association Modification Board Members
	to attach a copy of permit to this form.

RIVERBRIDGE