

SOUTHLAKE I CONDOMINIUM ASSOCIATION, INC.

C/O CMC Management, Inc.

2950 Jog Road, Greenacres, FL 33467

561-641-1016, 561-641-9118 Fax

REQUEST FOR REVIEW FOR ARCHITECTURAL/EXTERIOR MODIFICATION

Owner's Name(s): _____

Owner's Unit Address _____

Email _____ Night Phone _____ Cell Phone _____

IN ORDER TO PROCESS THIS APPLICATION THE FOLLOWING MUST BE ATTACHED:

1. The appropriate drawings showing both a Plan View and an Elevation
2. Specifications of the proposed modifications (example: color, style, size, etc.).
3. Contracted work must include copies of license & insurance.
4. Hurricane shutters to match previously approved, then no approval required

Your approval shall be subject to the following:

1. You are responsible for obtaining any necessary permits from the appropriate Building and Zoning Department(s).
2. Access to areas of construction is only to be allowed through your property, and you are responsible for any damage done to the common elements during construction. NO SUNDAYS. Only M – Sat 8:00 am-5:00pm.
3. All modifications must adhere to all federal, state and county rules.
4. This is approved from the “aesthetic point of view and does not constitute approval from an engineering/structural point of view.”
5. Any modifications, additions or deletions made to the attached plans after approval will void this approval and require a new application be submitted and reviewed.
6. No construction debris is to be left in dumpsters. Must be removed by construction company.
7. 2nd Floor replacement of flooring must include sound control–must meet requirements of 2017 FL Building Code 60 db. Association to approve product

Approval is hereby requested to make the following modification(s), alterations, or addition(s) as described below and on the additional attached pages:

Upon approval of my request for this modification, I/We will assume all liability for any damage incurred as a result of this modification. I/we understand that I/we will be responsible for any and all maintenance required for this modification/alteration. I/we also agree to obtain any permits that may be required from any and all governmental agencies for this modification.

Owner(s) Signature(s) _____

(FOR BOARD OF DIRECTORS USE ONLY)

Date application received _____ Date reviewed _____ Approved or Disapproved

_____ **(Board of Director Signature)**

Notes from the Board of Directors below:
