<u>The Biltmore at Coral Lakes Homeowners Association</u> <u>Request for Approval for Architectural Modification</u>

(Approval of this form could take up to 3	0 days. Make sure you submit with ample time prior to commencement of work.)
To: Board of Directors and/or Architectu	ral Committee for The Biltmore at Coral Lakes Homeowners Association
From: Owner(s) Name:	Acct #
Address:	
Day Phone:	Email:
In order to Process this Applic	ation, the following must be attached:
 This completed application Description and specification of Contractor's License & Insurance Copy of Proposal or Contract (If Copy of County Permits (If application) 	applicable)
Request is hereby being made for the foll	owing modification, alteration or addition as described below. (Attach additional page if req.):
□ Roofing □ Painting □ La	ndscaping
Contractor Information	
	Fax:
License #:	Insurance Policy#:
 Access to areas of construction are to property, other property and personal in incurred as a result of violation of rules at All construction debris must be removed homeowner to make sure all common construction / modification. All contractors must be properly licensed prior to the commencement of the modified. In the event of an accident, the Associate All installations will be of professional and the ARB reserves the right to request addered. If work commences prior to the approval 	ecessary permits from the appropriate building and zoning departments. be made through your property and you are responsible for any damages incurred to common jury as a result of this modification as well as any additional maintenance cost that may be nd regulations or negligence. ved on a daily basis from the property by you or contractor. It is the responsibility of the areas including sidewalks, swale, roadways, etc. are left clean on a daily basis while under d, bonded and insured for liability and workers' compensation. Proof of such is REQUIRED cation. ion will hold the homeowner(s) personally liable for any & all claims, injuries and defense cost.
Signature of Owner(s)	Date:
(For Board of Directors and/or Arch	itectural Committee Use Only)
Date Application Received:	Date of Approval or Disapproval:
Approval Granted: subject to add	itional requirements as noted on attached page(s). (Check if applicable)
Approval Denied: Explanation: _	

Member of the Board of Directors / Architectural Control Board:

Signature: _____ Print Name: _____