



Courtesy Property Management
 13250 SW 135th Ave
 Miami, FL 33186
 305-254-3888

Architectural Control Committee Review Application

Any homeowner wishing to make any additional/alteration to the outside of a parcel, lot unit, must complete and return this form to the management company at: *Courtesy Property Management located at 13250 SW 135 Avenue, Miami, Florida 33186*

WORK MAY NOT BEGIN UNTIL THIS REQUEST HAS BEEN APPROVED

In accordance with the Associations Documents and Rules & Regulations* All improvements must be completed **within six* (6) months** of approval date or application is nulled. A copy of all required Dade County Permits are to be provided for Association Files prior to commencement of work.

(PLEASE PRINT)

Name of Owner(s): _____ Acct#: _____

Property Address: _____ Miami, FL _____

Email: _____ Association Name: _____

Home Phones:(_____) _____ Work Phone: (_____) _____ Cell: (_____) _____

INSTRUCTIONS: Approval is hereby requested for the following modifications and/or alterations as described below and on attached pages. Please Indicate below what type of change or alteration you wish to make. Be specific, indicating type of material, color, shape, style, dimensions, etc. To process this request, the following must be attached:

- A COLOR PHOTOGRAPH OF THE ENTIRE FRONT OF THE HOUSE.
- A photograph of your house where proposed changes will be performed.
- A copy of the Site Survey, with the proposed modifications drawn on the survey; the appropriate drawings showing both, a Plan View and an Elevation; and specifications of the proposed modifications.

- | | | |
|---|---|--|
| <input type="checkbox"/> Addition to the Home | <input type="checkbox"/> Basketball Hoop* | <input type="checkbox"/> Satellite 18" Antenna |
| <input type="checkbox"/> Doors Identical | <input type="checkbox"/> Hurricane Shutters NOA(Notary Fee) | <input type="checkbox"/> Screening Identical |
| <input type="checkbox"/> Outdoor Lighting | <input type="checkbox"/> Landscaping * | <input type="checkbox"/> Screening/Enclosure New |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Iron, Metal or Similar Bars | <input type="checkbox"/> Solar Collectors |
| <input type="checkbox"/> Awning | <input type="checkbox"/> Patio | <input type="checkbox"/> Window Treatment* |
| <input type="checkbox"/> Exterior Paint | <input type="checkbox"/> Play Structure* | <input type="checkbox"/> Wall/Fence |
| Wall Color _____ | <input type="checkbox"/> Pool | <input type="checkbox"/> Other _____ |
| Trim Color _____ | <input type="checkbox"/> Roof identical | |
| <input type="checkbox"/> Exterior Paint Identical Color | <input type="checkbox"/> Roof Repairs | |

IF PAINTING THE EXTERIOR OF THE HOUSE, PLEASE ATTACH COLOR SAMPLES TO THIS APPLICATION, INDICATING WHICH ONE IS FOR THE WALLS AND THE TRIMS.

**May not require a Dade County Building Zoning Permit*

***Include a \$ 15.00 money order only payable to: Courtesy Property Management to notarize approval.

IS THIS A RE-SUBMITTAL? YES NO

Please Check the Appropriate Boxes:

Initial Plans and/or Specifications Attached

Revised Plans and/or Specifications Attached

Color Plan/Samples Attached

Materials Designation Plan/Samples Attached

Drainage Surface Water Plan Attached

Alteration Criteria Signed Attached • Initial

Time (or Completion) of Improvement: ____/____/____ Anticipated Commencement Date: ____/____/____

Owner Signature: _____ Contractor's Signature: (if applicable) _____

MUST PROVIDE A COPY OF THE CONTRACTORS LICENSE AND PROOF OF INSURANCE

All changes and alterations shall also be subject to all applicable permits requirements and to all applicable governmental laws, statutes, rules, regulations, orders, and decrees. Neither the Board of Directors, nor any member thereof, shall be liable to the Association or any Homeowner, or any other person or entity for any loss, damages or injury arising out of or in any way connected with the performance or nonperformance of the Boards duties hereunder, unless due to the willful misconduct or bad faith of a member, and only that member shall have any liability. The Board shall review and approve or disapprove all plans submitted to it for any proposed improvement alteration or addition solely on the basis of aesthetic consideration and the overall benefit or detriment, which would result to the immediate vicinity and to the Community.

Your approval is 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 are only to be allowed through your property and you are responsible for any damages done to the Common areas during construction.

FOR STRUCTURAL CHANGES METRO DADE COUNTY BUILDING & ZONING PERMIT MUST BE FURNISHED AFTER APPLICATION IS APPROVED.

*****ADD A MONEY ORDER FOR \$15.00 PAYABLE TO COURTESY PROPERTY MANAGEMENT TO NOTARIZE APPROVAL**

CASH ACCEPTED AT THE OFFICE

(FOR OFFICE USE ONLY)

Date Application: ____/____/____

Received By: _____

Date of Approval/Disapproval: ____/____/____

Approved Disapproved

Architectural Control Committee, Agent and/or Board of Director Date: ____/____/____

Explanation of Conditions and/or Disapproval:

