

PEBBLE SHORES CONDOMINIUM ASSOCIATION, INC.
REQUEST FOR REVIEW
ARCHITECTURAL AND/OR LANDSCAPE MODIFICATIONS

OWNER DATA:

Owners Name: _____

Community: _____

Lot #: _____

Street Address: _____

Day Phone: _____ Evening Phone: _____

MODIFICATION SPECIFICATIONS:

Describe Modification Requested: _____

Location (be specific): _____

Color: _____ Dimensions: _____

Material: _____

Expected Date of Completion: _____

SUBMITTAL REQUIREMENTS CHECKLIST:

- _____ Request for Review (This Form)
- _____ Signed Acknowledgement
- _____ One copy of plans – must show distance from adjacent units (if applicable)
- _____ Samples of product and manufacturer specifications (1)
- _____ Receipt (To be maintained by owner upon submittal)

FOR COMMITTEE USE ONLY

NEIGHBORHOOD BOARD OF DIRECTORS OR AUTHORIZED COMMITTEE:

Date Received: _____ [] Approved [] Disapproved

Board / Committee Signatures:

MASTER COMMUNITY ASSOCIATION MODIFICATION COMMITTEE:

Date Received: _____ [] Approved [] Disapproved

Board / Committee Signatures:

THIS SECTION NOT APPLICABLE

MODIFICATION REQUEST
ACKNOWLEDGEMENT

Approval is hereby requested to make modifications as described on the attached Request for Review, Exterior Architectural and/or Landscape Modification form.

In requesting approval of this construction, I acknowledge full responsibility for the contractor's performance.

I understand:
(Please initial)

_____ That the purpose of the inspection is to determine that construction has been completed in conformity with the approved proposal and the premises left in good condition.

_____ That Board approval does not constitute a representative or warranty of the quality of the work performed and that I am solely responsible for determining that the contractor's performance is satisfactory.

_____ That neither the Management Company, Association Board of Directors, Committee or employees in any way endorse contractors or vendors for work within the community.

_____ That I should obtain a copy of my contractor's license and an original certificate of insurance.

_____ That I will notify the Board of Directors of the construction schedule and project completion date so inspections can be arranged.

_____ That I will comply with all State and County building code requirements, attain a license if required for my particular modification and post said license.

I, the undersigned unit owner(s), accept the responsibility for any structural or water damage resulting from work done at my unit. Upon resale, the new owner(s) becomes responsible for same as stated in the restrictive covenant.

Signature of Owner

Signature of Owner

Date: _____

Date: _____