## **FAY'S COVE AT CORAL BAY**

Architectural Review Form c/o United Community Management Corp. 11784 West Sample Road

11784 West Sample Road
Coral Springs, FL 33065
954.752-8119 954.752-3352 fax

Email: <u>dvarrone@unitedcommunity.net</u>

To request approval for an **improvement** or **modification** to your property, you are required to fill out and submit this form to the Association at the address noted at the top of this form **prior** to commencing work. A \$100 administrative fee will be imposed by the Association if improvements/modification commence prior to the written response of the Architectural Review Board.

The Architectural Review Board will review your request and provide the association with approval or denial of request. The Association will provide a written response within **thirty** (30) **days** of receiving your request. **Improvements/modifications** are **effective for 180 days from the date of approval by the Review Board.** 

Note: the City of Margate may require a building permit. Please call 972-1232 if you have any questions.

Property Owner Name	e:									
		Date:Email:			1:					
Property Address:		Telephone #: ( )								
Driveway:		Cloud White				Cement	Bombay			
						Seagull				
<b>Instructions</b> : Check or enter all that apply to your improvement or modification.										
Location on property:	Front:		Side: Rear:							
Dimension of item(s):	Length:		Width:		Height:		Depth:			
Is improvement or		Yes				No				
modification above the fence										
line?										
Is improvement or		Yes				No				
modification visible from the										
street? Is improvement or		Yes				No				
modification visible from any		165				110				
adjacent property?										
J		Yes	Yes			No				
Declaration of Covenants,										
Conditions, Restrictions?										

IN ACCORDANCE WITH THE REQUIREMENTS OF THE ARCHITECTUAL REVIEW BOARD OF THE DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS OF THE ASSOCIATION DOCUMENTS FOR FAY'S COVE AT CORAL BAY HOMEOWNERS ASSOCIATION, TO WHICH I BELONG, I HEREBY REQUEST APPROVAL FOR THE FOLLOWING IMPROVEMENT OR MODIFICATION TO THE ABOVE NAMED UNIT: (BRIEFLY DESCRIBE IMPROVEMENT). A COPY OF LICENSE, CERTIFICATE OF LIABILITY INSURANCE (Certificate Holder Section to list Fay's Cove at Coral Bay and United Community Management Corp) & WORK COMP OF VENDOR IS REQUIRED TO BE INCLUDED WITH REQUEST.

Give a description of your Note: Expansion or additional dimensions of the additional sketch to help the Board between the sketch to help the sketch to help the Board between the sketch to help the sketch t	on to existing structures made along with its placement	ust be accor on the prop	mpanied with a si erty. You are en	te plan layout	showing	
I understand/acknowledge approval, Association may owner's expense. All contacts AFFIDAVIT:  I do hereby acknowledge restoring any damage to contractor I have hired to	e that I will be responsible common property to its	lification/ir oris as resul e for repai s original c	nstallation and r t of improvemen ring any damage ondition resultin	estoration to t. to common g in negligen	original forn area property ce or error fi	n at the
		-				
APPLICANT SIGNATURE	DATE	,	APPLICANT SIGNA	DATE		
	o not write below this		Association u			
Approval:	Yes	No		Subject to:		
Reason for denial:						
Authorized by: (Board member or agent)		Date				