

**Las Brisas at Coral Bay Village Association, Inc.
Architectural Modification Request Form**

Owner's Name: _____

Address: _____

Lot Number: _____ Phone: _____ Email: _____

Send to – Architectural Review Board
C/O Alliance Property Systems
PO Box 19439
Plantation FL 33318
Fax: 954-473-4755 or Phone: 954-473-4733 x4
Email to sorsini@allprosys.net

I/We hereby make application to the Architectural Review Board to make the following changes and/or additions to the exterior of my residence.

Please attach a detailed description of your modifications along with the drawings and surveys. Your description must include but is not limited to, materials, color, size, manufacturers specifications, etc.

I (The Owner) agree:

1. That if the modification is not completed as approved, said approval can be revoked and the modification removed by the owner.
2. That I am responsible to pay for and repair any and all damage done to the common areas as a result of the modification.
3. To abide by the decision of the Board of Directors.
4. To comply with the state, county, and city building codes.
5. To obtain all necessary permits.
6. To provide a copy of all permits to the Board of Directors.

I have read, understand and agree to all of the above.

Signature (owner)

Date of request

Signature (Assoicaition's Signature)

Date of Approval