

**Architectural Modification Request Form
The Cape at Coral Bay Village Association, Inc.**

Owner's Name - _____
Address - _____
Lot Number _____

Home Phone # _____ Work Phone # _____

Send to – Architectural Review Board
C/O Alliance Property Systems
PO Box 19439
Plantation FL 33318

(954) 473.4733 ext. 2

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.

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

Date of request

Signature (Owner)

Date of Approval

Signature (Association's Signature)