The Edgewater Village HOA Architectural Approval Request Form

Н	HOMEOWNER NAME	
ADDRESS CELL PHONE:		
CE	ELL PHONE: EMAIL:	
Br	rief Description of Improvement	_
1. 2.	A copy of your lot survey with the exact location of the proposed improvement drawn in a clear and legible manner. If you are doing the work yourself, include a detailed sketch or drawing of the improvement or change; or	s
5. 6.	 Name, address & telephone number of contractor. Contractor's Certificate of Insurance Number, Occupational License Number and Certificate of Competency Number. If the improvement or any part thereof will be located within five (5) feet of the neighboring property, the improvement's relationship to that property should be shown in your sketch. If you live on a corner lot and the street is on the side of your proposed improvement, please indicate this in your drawing. If you are painting your home a picture of your house showing the roof color is needed. Please submit a separate application for each improvement to edgewater-hoa@outlook.com for approval or mail it to: 	
	·	
	4800 North State Road 7, Suite 105	
	Lauderdale Lakes, FL 33319	
1. 2. 3. 4. 5. 6.	An approval is valid for sixty {60) days unless otherwise specified. The unit owner is responsible for obtaining any permits required from the city, County governmental agencies, etc. The unit owner is responsible for all damage to any utilities, including sewer, water, cable, electric and telephone. The unit owner must remove all debris (concrete, fill, etc.) from around your home and re-sod any areas that are destroyed. The unit owner is responsible for any damage that may be caused to the sidewalks or roadway from heavy equipment. The unit owner may not alter the drainage of your property or your neighbor's property. The final inspection and approval of the Association board after construction is completed.	
	HOMEOWNERS AFFIDAVIT	
As co	essociation, for the architectural change above noted and if said approval is granted. I agree to comply with the anditions stipulated herein. I further understand that I may be prosecuted by my Association should I fail to comply the the covenants a restriction of the Association, or if I intentionally misrepresent information on this form.	
SI	IGNATURE OF APPLICANT: DATE:	
	FOR ASSOCIATION USE ONLY	
	Approved by HOA RepresentativeNot Approved	

HOA Representative: _____Signature: _____

Date: _____