

# **ARCHITECTURAL CHANGE APPLICATION COVER SHEET**

**Mail to: Port Antigua at Coral Bay Village Association, Inc.**

**c/o GRS Community Management.**

3900 Woodlake Blvd., suite 309, Lake Worth, FL 33463

**or Email to: AccApps@grsmgt.com**

**For questions: tele: 561-641-8554**

## **HOMEOWNER INSTRUCTIONS:**

1. If the modification is not completed as approved, said approval can be revoked and the modification will be required to be removed by the owner at the owner's expense.
2. Include one (1) copy of the documents listed below WITH your architectural request or it may not be accepted if it's incomplete.
3. If you are doing the work yourself, put "Homeowner" next to "Contractor Name" on the Architectural Change Application. Only submit documents 1-3 that are listed below.
4. I/we am responsible to pay for and repair any and all damage done to the common areas as a result of the installation.
5. I/we must comply with all applicable the state, county, or city building codes and that I/we must obtain all necessary permits and approvals at my expense.
6. I/we must abide by the decision of the Architectural Review Committee or the Board of Directors.
7. That if the modification is not approved or does not comply, I/we may be subject to court action by the Association and that I/we shall be responsible for all reasonable attorney's fee.
8. If while considering this application, the Association incurs any professional consultation expenses, such as conferring with a licensed architect, I/we will be responsible for said fee. The homeowner will be notified in advance if such services are required.
9. I/we understand the review process may take as long as 30 days from when the form is received by the property manager before results are determined.
10. I/we understand Approval from CDD (Coral Bay Community Development District) is required when it's an improvement that will occur on or affect the maintenance of easement or property owned by the District such as a fence, dock, landscape, structure, irrigation, driveway extension, etc.

**I/We understand and agree to comply with the instructions provided above and will fill out, sign, and submit both pages of the Architectural Request Form to management with all other necessary documents listed below**

\_\_\_\_\_  
**Homeowner's Name (Print)**

\_\_\_\_\_  
**HOA Address (Number and Street)**

\_\_\_\_\_  
**Homeowner's Signature**

\_\_\_\_\_  
**Date**

## **DOCUMENTS LISTED BELOW MUST BE SUBMITTED WITH YOUR REQUEST:**

1. Complete this form AND the ARC form (2 pages) – Fill in each box indicating colors, materials, and proposed work.
2. A picture of the item/material that will be installed or used for your request (Windows, doors, paint samples, etc.)
3. A copy of the property Survey or a Site Plan indicating where and what the improvements are (If applicable)
4. A copy of the Contractor's License
5. A copy of the Contract detailing the work (does not have to show the price)
6. 6. A copy of the Contractor's General Liability Insurance Certificate & Workers Comp Certificate or Exemption form. The General Liability Certificate and Workers Comp Certificate must be made out to your Association as follows:

PORT ANTIGUA AT CORAL BAY VILLAGE ASSOC., INC

c/o GRS Community Management.

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**DOCUMENTS CAN BE RETURNED TO GRS COMMUNITY MANAGEMENT VIA EMAIL, MAIL OR CAN BE DROPPED OFF TO OUR OFFICE (SEE TOP OF PAGE FOR ALL ADDRESSES).**