

ARCHITECTURAL MODIFICATION REQUEST FORM

This document will become part of the Homeowners contract and must be complied with by any succeeding homeowners:

I, _____, do hereby request permission to make the following
modification to my home at _____ in the Bay Point Association.

Home Phone: _____

Work Phone: _____

Email Address: _____

DESCRIPTION OF REQUEST:

Attach the following as applicable:

- Plot Plan with proposed modification(s) to approximate scale with dimensions.
- Complete description (photos/drawings) as to construction design, materials (types and sizes), and color/finish.
- Floor Plan, Elevation, Section Drawing (i.e., footings).

I do, by my signature, understand and agree to the following:

1. That applicable county/city permits will be obtained.
2. That I assume total responsibility for the upkeep and maintenance of all modification(s) made in the area. I also acknowledge that obtaining insurance for the improvement is my responsibility.
3. That the modification(s) will not in any way hinder yard care.
4. That I will accept total responsibility for any damage to person or property that may be caused by this modification(s).
5. That the Homeowners Association reserves the right to require removal or repair of the modification at my own expense if: 1) the modification is not constructed or installed as per specifications submitted for approval with this form; or 2) the modification is not maintained in a safe condition; or 3) the modification is not maintained in keeping with the surrounding structures and is not satisfactory to the Board of Directors.
6. I certify that I have read and agree to follow the rules and regulations pertaining to architectural control and review (if applicable).

Date

Homeowner Signature(s)

Date Received by Association Signature

| | |
|---|--|
| <input type="checkbox"/> | APPROVED by the Covenants Committee; OR |
| <input type="checkbox"/> | APPROVED with the following contingencies by the Covenants Committee: _____ - _____ - _____ - _____ |
| <div style="display: flex; justify-content: space-between;"><div>_____ CC Signature</div><div>_____ Date Signed</div></div> | |
| <input type="checkbox"/> | DISAPPROVED for the following reason(s) by the Covenants Committee: _____ - _____ - _____ - _____ |
| <div style="display: flex; justify-content: space-between;"><div>_____ CC Signature</div><div>_____ Date Signed</div></div> | |
| <input type="checkbox"/> | APPROVED by the Board of Directors; OR |
| <input type="checkbox"/> | APPROVED with the following contingencies by the Board of Directors: _____ - _____ - _____ |
| <div style="display: flex; justify-content: space-between;"><div>_____ Board Member Signature</div><div>_____ Date Signed</div></div> | |
| <input type="checkbox"/> | DISAPPROVED for the following reason(s) by the Board of Directors: _____ - _____ - _____ - _____ |
| <div style="display: flex; justify-content: space-between;"><div>_____ Board Member Signature</div><div>_____ Date Signed</div></div> | |