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Exclusive Property Management Group
175 Fontainebleau Blvd
Suite 0E/
Miami, FL 33172
Tel: 786-577-2974 C k _qj8 g l dm > exclusivepmg.com

**Application to Modify, Alter, Add, Remove, Repair or Improve
the Inside or Outside of a Condominium Unit**

Any homeowner wishing to make a modification, an alteration, add, remove, repair or improve their unit must complete and return this form.
* WORK **MAY NOT COMMENCE** UNTIL THIS FORM HAS BEEN APPROVED IN ACCORDANCE WITH THE ASSOCIATION BY-LAWS, RULES and/or REGULATIONS and a copy of the permit(s), license(s) and proof of insurance(s) are given to the Management office.
* It is homeowners responsibility to refer to the Association By-Laws, Rules and/or Regulations for guidance.
* All work must be completed within three (3) months of approval date.
* Homeowner is responsible to obtain all necessary City, County or State permits.
* It is the homeowner's responsibility to inquire with the Authorities if any such permits are required.
* Only licensed and insured contractors, providers or workers can perform the work.
* Homeowner can perform their own work but must submit copy of proper liability insurance.
* Contractors/vendors/workers will not be granted access to the community until all requirements are met.

Name of Owner: Unit No.:

Owners Address: City: St: Zip:

Daytime Phone: Email Address:

Approval is hereby requested for the following modification(s), alteration(s), addition(s), removal(s), improvement(s) and/or repair(s) as described below and/or on the attached pages. I have indicated below what type(s) of change(s) i wish to make. I have included specifics, inclusive of but not limited to, what type of material, color, shape, style, dimension, etc. as well as drawings, diagrams, brochures, etc. I further attach pictures of my unit, as of today's date, where these changes are to take place.

Is this a re-submittal: ☐ Yes ☐ No

Is this in response to a violation: ☐ Yes ☐ No If yes, attach copy of the violation.

Is work being performed by owner: ☐ Yes ☐ No If not, name of contractor:

Contractor License No.: Contractor Insurance Carrier:

Contractor Insurance Policy No.:

Work to be performed in (check all that apply):

☐ Kitchen/Pantry ☐ Living/Dining Area ☐ Hall Closet ☐ Patio/Balcony ☐ A/C Blower ☐ A/C Condenser
☐ Main Bedroom ☐ Main Bedroom Closet ☐ Main Bathroom ☐ Other: Specify
☐ 2nd Bedroom ☐ 2nd Bedroom Closet ☐ 2nd Bathroom

Work to be performed will involve (check all that apply):

☐ Electrical ☐ Plumbing ☐ Mechanical ☐ Carpentry/Sheet Rocking ☐ Wall Tiling ☐ Floor Tiling

A photograph of the proposed work area and a drawing or site plan of the proposed work is to be included with this application. Please indicate below what type of changes or alterations you wish to make. To prevent delays, please be specific indicating what type of materials, color, shape, style, dimensions, etc... will be used.

Describe in details the work to be performed:

☐ Check here is more space is required and continue on additional paper.

Attachments: ☐ Drawings ☐ Product Brochure ☐ Product Details/Specifications ☐ Pictures ☐ Diagrams
☐ Permits ☐ Licenses ☐ Insurance Binder addressed to Condominium

Please read all pages entirely. Please make sure to include all paperwork and documents noting the attachments above. All work is subject to all applicable permit requirements, all applicable governmental and Association laws, statutes, rules, regulations, orders and decrees. Neither the Board of Directors, nor any member thereof, shall be liable of the Association, any homeowner, or any other person or entity for any loss, damage, or injury arising out of, or in any way connected with, the performance or non-performance of this work or of the board duties hereunder, unless due to willful misconduct or bad faith of a member, and only that member shall have any liability. The board shall review and approve or disapprove all plans submitted to it for any proposed work solely on the basis of aesthetic consideration, how it affects the common areas (visible or invisible) and how it would affect the immediate vicinity. By signing here below, you agree and understand your responsibilities and liabilities, and that you remain fully responsible for any damages, losses, disruptions and injuries this work may cause to Association property, communal grounds and areas and to property owned by others.

Print Owner Name

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 Date:

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Owner Signature

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Print Contractor/Worker Name:

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 Date:

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Contractor or Worker Signature

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