BOCA FONTANA HOMEOWNERS ASSOCIATION, INC.

Return the completed form with the required documents to:

Superior Association Management 20283 State Road 7, Suite 219 Boca Raton, FL 33498 Email: mcarrion@superiormgmt.net

	Office Use Only	
Received Date:	Received By:	
Correspondence:		
Approved:	Not Approved:	
Agent:		_Date:
Agent:		_ Date:

Request For Architectural Committee Review

RUSH REVIEW AVAILABLE FOR A FEE OF \$100. INCLUDE A CHECK MADE PAYABLE TO BOCA FONTANA HOA.

GUARANTEED REVIEW WITHIN 7 DAYS.

NAME:	
BOCA FONTANA ADDRESS:	
EMAIL:	

Brief Description of project:

DOCUMENT CHECKLIST FOR EXTERIOR PAINT:			
CONTRACTORS LICENSE AND INSURANCECURRENT PICTURE OF THE HOME			
OF COLOR:TRIM COLOR:TRIM COLOR:			
GARAGE DOOR COLOR:FRONT DOOR COLOR:			
DOCUMENT CHECKLIST FOR FENCE REPLACEMENT AND COLOR CHANGE:			
CONTRACTORS LICENSE AND INSURANCE CURRENT PICTURE OF THE HOMESURVEY WITH FENCE MARKED			
MATERIAL USED: COLOR:			
DOCUMENT CHECKLIST FOR DRIVEWAY RENOVATION:			
CONTRACTORS LICENSE AND INSURANCECURRENT PICTURE OF THE HOMESURVEY WITH DRIVEWAY MARKED			
DOCUMENT CHECKLIST FOR LANDSCAPE RENOVATION:			
CONTRACTORS LICENSE AND INSURANCE CURRENT PICTURE OF THE HOME SURVEY WITH PLANT AND TYPE MARKED			
DOCUMENT CHECKLIST FOR DRIVEWAY RENOVATION:			
CONTRACTORS LICENSE AND INSURANCE CURRENT PICTURE OF THE HOME SURVEY WITH PLANTS MARKED			
MATERIAL USED: COLOR:			
Homeowners Affidavit I read the Covenants and Restrictions of my Association and agree to abide by such covenants and restrictions. I will also secure			

my required local government and/or zoning Permits to ensure that any applied exterior work/change/construction meets any/all applicable Codes and/or Ordinances. No work will commence without the approval of the Association or the securing of proper permits if applicable.

Signed: Date: