

Fountain Square Condominium Association, Inc.

Request for Architectural Changes

WORK MAY NOT BEGIN PRIOR TO WRITTEN APPROVAL FROM BOARD

NAME: _____

Date: _____

ADDRESS: _____

Phone: _____

Brief Description of alteration, improvement, addition, etc.

Before filling out please read the Fountain Square documents and community standards and policies and review local ordinances. If you have questions please call our Property Manager at the above number or email at bydesign89@gmail.com

When appropriate to the requested addition or modification, please attach the following:

1. Lot survey showing changes proposed (in an accurate scale drawing).
2. Elevation and building material description (color, attach sample when possible)
3. Proposed start date and completion date.

Upon signing this request, the homeowner understands that the Architectural Control Committee functions only to recommend to the Board of Directors the acceptability of the appearance of changes to the building exterior, the community or land. There is no intention, expressed or implied, to approve or disapprove any equipment, its function, contractor or sub-contractor, or to make any representation that it meets applicable county codes or permitting requirements. The homeowner also accepts all responsibility for the maintenance of operation and/or appearance of any installation, change or addition and required permits. It is also understood by the owner that the association, its board of directors and their agent is not responsible for determining compliance with local zoning or permitting requirements. For any work which a permit is required, a copy of the permit must be filed with the association after approval of the board of Directors and prior to commencement of construction. The homeowner undertakes all responsibility for compliance with construction to building code standards and permitting and approval of the application does not, in any fashion, constitute a waiver or exception from applicable codes or permit requirements.

Owner's Signature

Date

ARCHITECTURAL CONTROL COMMITTEE/BORAD OF DIRECTORS RECOMMENDATION

Signature: _____

Date: _____

Signature: _____

Date: _____

Your Request has been Approved: _____ **Denied:** _____ **Date:** _____

Conditions: _____

PLEASE MAIL YOUR REQUEST TO: Fountain Square Condominium Association, Inc. c/o Property Management by Design, Inc. 2708 Alt 19 North, Suite 604-1, Palm Harbor, FL 34683 (727) 614-9911.