

CONTROL NUMBER: _____

ARCHITECTURAL REVIEW BOARD REQUEST
EXECUTIVE ESTATES OF BOYNTON BEACH HOMEOWNERS ASSOCIATION, INC.
(CITRUS GLEN)
APPLICATION FOR ALTERATIONS

OWNER NAME: _____ DATE: _____
ADDRESS: _____ PHONE#: _____
LOT NUMBER: _____

DESCRIBE IN DETAIL, TYPE OF ALTERATION & MATERIALS TO BE USED:

An application requesting approval of any alteration which occurs outside the exterior walls of the building, and owner's lot. MUST BE ACCOMPANIED BY A SKETCH INDICATING LOCATION, SIZE & TYPE OF CONSTRUCTION, AND OTHER PERTINENT INFORMATION.

If approval is granted, it is not to be construed to cover approval of any County code requirements. A building permit from the City or Palm Beach County Building Departments will be required on most property alterations or improvements.

As a condition precedent to granting approval of any request for a change, alteration or addition to an existing basic structure, that the applicant, the heirs and assigns thereto, hereby assume sole responsibility for the repair, maintenance or replacement of any such change, alteration or addition. It is understood and agreed that the Association and the Management Company, are not required to take any action to the repair, replace or maintain any such approved change, alteration or addition, or any damage resulting therefrom for any reason to the existing original structure, or any other property. **THE UNIT OWNER ASSUMES ALL RESPONSIBILITY AND COST FOR ANY ADDITION OR CHANGE, AND ITS FUTURE UPKEEP.**

DATED: _____ OWNER'S SIGNATURE: _____
OWNER'S SIGNATURE: _____

ACTION BY ASSOCIATION:

DATE: _____ APPROVED: _____ NOT APPROVED: _____

BOARD MEMBER SIGNATURE

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WAVER OF LIABILITY

The undersigned hereby agrees that any and all liability caused by or arising from acts which may increase the hazard of susceptibility to loss on the described premises shall not be held against the Association or the Management Company, et al "as their interests may appear" and they shall be held harmless from any liability arising therefrom and indemnify them for all losses, costs, expenses and attorney's fees in connection with any such addition to their unit/home.

Dated: _____

Witness:

Unit Owner

Witness

Unit Owner

Please Return To:

Gulfstream Services Management, Inc
P.O. Box 24-4225
Boynton Beach, FL 33424-4225

You may also deliver this document to
the office in the clubhouse at:

195 Temple Avenue.