

San Messina Community Association

C/O Southern Shores Management Inc
6801 Lake Worth Rd Suite 111
Greenacres Fl 33467
Office: 561-460-2619 Fax: 1-888-582-3876

ARCHITECTURAL REQUEST FORM

Date: _____

Owners Name: _____

Address: _____

Phone Number: _____

I have read the Covenants and Restrictions of my Community Association and agree to abide by them. I understand and, in return for approval agree to be responsible for the following:

- For all losses caused to others as a result of this undertaking whether caused by me or others
- To comply with all local building codes or permits requirements.
- For any encroachment(s)
- To comply with condition of acceptance (if any)
- Complete the project according to plans.

Owners Signature

- DOCUMENT CHECKLIST
- SURVEY/ PLOT PLAN
- BLUIDNG PLANS
- ELEVATIONS
- DETAILS
- SPECIFCATIONS
- PERMIT
- PHOTOS
- OTHER

BRIEF DESCRIPTION OF ADDITION. ALTERATION, IMPROVEMENT:

-----DO NOT WRITE BELOW THIS LINE-----

- () APPROVED BY ASSOCIATION
- () APPROVED SUBJECT TO CONDITIONS
- () INSUFFICIENT INFORMATION –SUBMIT NEW FORM INCLUDES THE FOLLOWING:
- () NOT APPROVED

SIGNATURE OF AUTHORIZED AGENT: _____ Date: _____