**ARCHITECTURAL REVIEW BOARD**

**REQUEST FOR MODIFICATION**

**GLADIOLUS PRESERVE HOMEOWNER’S ASSOCIATION, INC.**

***Sandcastle Property Management***

***16266 San Carlos Blvd, Suite 10,***

***Fort Myers, FL 33908***

***239-466-3330***

(Please mail completed request to the above address, fax to 239-443-4572 or e-mail to Matt@sandcastlepmb.com

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby request approval by the Architectural Review Board for the modification shown below to Lot # \_\_\_\_\_\_\_ located at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* Detailed description of work to be performed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ The work will be performed by \_\_\_\_\_ homeowner \_\_\_\_\_ contractor (Please check one.) Please review and confirm the following:-

**1. I have attached to this form supporting drawings, including size, location, description of materials, brochures, color samples, detailed landscape plans, surveys and any applicable information.**

**2. I understand and agree that ARB approval does not constitute a representative or warranty of the quality of the work performed, and that I am solely responsible for determining that the contractor's performance is satisfactory.**

**3. I agree to submit proof of insurance and a copy of the contractor's license, for each contractor, to the managing entity, prior to commencement of work.**

**4. I understand and agree that it is my responsibility to comply with all applicable governmental requirements, including but not limited to permitting.**

Upon approval of my request for this modification, I/We, the undersigned unit owner(s), will assume all liability for any damage incurred as a result of this modification as well as any additional maintenance costs that may be incurred. Upon resale, the new owner(s) becomes responsible for same as stated in the covenant.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Owner(s) Signature(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address if different from above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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The above request for modification to Lot # \_\_\_\_\_\_ has been: ( ) APPROVED

( ) APPROVED WITH THE FOLLOWING CHANGES ( ) DISAPPROVED

Explanation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ARB Chairperson: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval is valid for 180 days from date of issue. Failure to complete the project within the 180 day

Time period will require the application to be to be re-submitted to the Board for approval. **All paint will**

**be in flat or satin sheen only. Approval expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**