

**ARCHITECTURAL REVIEW COMMITTEE
REQUEST FOR MODIFICATION**

TAMARYND PLACE CONDOMINIUM ASSOCIATION, INC.

I, _____, hereby request approval by the Architectural Review Committee for the modification shown at _____.

Modification Request:

By signing this application form you agree that any damage to common areas or other owner's property caused by the project will be charged back to the unit owner. I/We also agree to obtain any permits that may be required by any and all governmental agencies for this modification.

Attached find the following additional information:

- **A diagram, including the dimensions, of the proposed modifications.**
- **The location of the modification on my property.**
- **Color samples, sound barrier, if applicable.**
- **Certificate of Insurance from contractor and license.**
- **Original Permits (If Applicable)**

Use additional sheets if necessary.

Owner(s) Signature(s): _____

Date Signed: _____ Phone No.: _____



The above request for modification to Unit/Lot# _____ has been:

- () DISAPPROVED
- () APPROVED
- () APPROVED WITH THE FOLLOWING CHANGES

DATE: _____ BOARD OF DIRECTORS: _____



RETURN FORM TO:

**Resort Management
2685 Horseshoe Drive S. #215
Naples, FL 34104
(239) 649.5526/Office (239) 403.1061/FAX
www.resortmanagementfla.com**