



**GRS Management Inc**  
15280 NW 79<sup>TH</sup> Court, Suite 101  
Miami Lakes, FL 33016  
PH: (305) 823-0072 Fax: (305) 823-4888  
Email: [Customer@grsmanagement.com](mailto:Customer@grsmanagement.com)  
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**MIAMI LAKES LOCH ANDREWS HOMEOWNERS' ASSOCIATION, INC.  
ARCHITECTURAL MODIFICATION FORM**

**Date:** \_\_\_\_\_ **Unit/Account #** \_\_\_\_\_

**Owners Name:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

Architecture Review (ARB) approval is required before commencing any improvements on your property. If work has begun, you should stop immediately until you obtain approval from the ARB.

Your approval will be based on the Architectural guidelines as set forth in the Association's Documents.

**Owner's Responsibilities:**

1. Complete all questions above and sign the application.
2. Provide pertinent pictures and a sketch of the work, if available.
3. If required by the Town, provide two complete sets of plans and specifications prepared by an architect, landscape architect, engineer, or other qualified person attached to this application.
4. Information contained in these plans and specifications or sketches of work must show the nature, kind, shape, height, materials, color scheme, and location of the requested change or alteration, depending on the type of modification requested.
5. As a condition precedent to granting any request of a change, alteration or addition, the applicant, his/her heirs and assigns, hereby assumes sole responsibility for the repair, maintenance or replacement of any such addition, alteration, or change and shall indemnify and hold the Association harmless from and against all claims, causes of action and expenses (including attorneys' fees) made against the Association in connection with, or as a result of, the modification to be performed under this request.
6. The applicant assumes all responsibility for any infringement on or interference with existing facilities and easements on the property.
7. The contractor's license and insurance must be attached to this application.
8. Approval or denial will be delivered within 15 days of the Association's receipt of this request, together with all required materials.
9. Approval of this request does not constitute approval of the structural integrity of the requested modification and is intended solely to maintain harmonious visual aesthetics within the community.
10. The applicant must obtain all applicable governmental permits or approvals, and a copy must be furnished to the Architectural Review Committee before work is to begin.

The owner is responsible for complying with the applicable Laws of the City, County, and State, including license and insurance. It is also the owner's responsibility to ensure that all vendors contracted for the job have the required workers' compensation and general liability insurance.

I/We understand that ARB must approve our request before I/We can start the job. I/We also acknowledge that we could be compelled to have the item removed or changed if it is completed without prior approval. Furthermore, if the modification(s) are not completed as approved, said approval will be revoked, and the modification(s) will be removed at the owner's expense. I/We hereby request to make the following modification(s), alterations, or addition(s) as described below and on the additional attached pages:

☐ Front Door ☐ Driveway ☐ Landscaping ☐ Windows ☐ Painting ☐ Roof ☐ A/C Unit

☐ Other: All exterior modifications, including but not limited to items above.

☐ Application Fees of \$200.00 payable to: MIAMI LAKES LOCH ANDREWS HOMEOWNERS' ASSOCIATION, INC

**Description:** \_\_\_\_\_

Color samples (pictures, brochures, etc.) must be included on the attached page.

**Job Started?** ☐ Yes ☐ No

**Date:** \_\_\_\_\_ **Signature Owners:** \_\_\_\_\_

\*\*\*\*\*

**Architectural Review Board (ARB) has 30 – 45 days to process this application.**

☐ Approved ☐ Disapproved ☐ Payment # \_\_\_\_\_ (Attached copy to the package)

ARB Signature

ARB Signature

ARB Signature

**Explanation of Disapproval:** \_\_\_\_\_



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**Sample:**

**Note:**