

CYPRESS COVE OF JUPITER HOMEOWNERS' ASSOCIATION
ARCHITECTURAL CONTROL COMMITTEE
REQUEST FOR APPROVAL OF ALTERATION

TO BE COMPLETED BY THE HOMEOWNER

Date _____ Date Received _____ Received by _____
 Homeowner's Name _____ Telephone No. _____
 Cypress Cove Address _____

Proposed Alteration (Please Type or Print): _____

Construction, installation, alterations and colors shall be in strict accordance with the approved drawings and notes on the drawings. Approval of this request is contingent upon your acceptance of total responsibility for repair of any and all damage that may occur to existing landscaping, irrigation systems, drainage, concrete drives and walks, fences, walls, electrical and electronic lines or equipment or any external portion of any residence in the process, or as a result of said alteration and completion of the alteration and all repair that may be necessary within (10) working days of the completion dated shown below. Further you will repair, in a timely manner and to the sole satisfaction of Cypress Cove Of Jupiter Homeowners' Association, Inc. all grievances that may be forthcoming as a result of this work. Commencement of the alteration work constitutes acceptance of these conditions.

Contractor's Name _____ Telephone No. _____
 Contractor's Address _____ Contractor License No. _____
 Proposed Start Date _____ Proposed Completion Date _____
 (It is advised the contractor issue the homeowner evidence of Liability and Workman's Comp Insurance.)

THE HOMEOWNER WILL NOTIFY THE PROPERTY MANAGER WHEN PROJECT IS COMPLETE AND AN INSPECTION SO AN INSPECTION MAY BE SCHEDULED.

The Architectural Control Committee requires three sets of drawings. For physical alterations, such as patio additions, pools, etc., each set must contain survey/plot plans, drawings and sketches of the proposed improvement, along with an application fee of \$25.00. One set stays in the Association's files. The Town of Jupiter requires two sets for your contractor to apply for your building permit.

I HAVE READ THE ABOVE AND UNDERSTAND MY RESPONSIBILITIES

Homeowner Signature _____ Contractor Signature _____
 Date _____ Date _____

TO BE COMPLETED BY THE ARCHITECTURAL CONTROL COMMITTEE

Approved Denied Signature _____ Date _____
 Signature _____ Date _____

Comments/Inspection Results: _____

Inspected by: _____ Date _____