

## HOME OWNER'S ASSOCIATION ALTERATION APPLICATION (ARC)

OWNER'S NAME:	DATE:
ADDRESS:	PHONE: ()
EMAIL ADDRESS:	(Where approval will be sent to)
DESCRIBE IN DETAIL, TYPE OF ALTERATION AND	MATERIALS TO BE USED:
(IF MORE SPACE IS REQUIRED, PLEASE ATTACH TO THIS FO	ORM. THANK YOU.)
MUST BE ACCOMPANIED BY A COPY OF YOUR	on which occurs <u>outside the exterior walls of the building</u> : LOT SURVEY WITH A SKETCH INDICATING LOCATION, ICABLE CONTRACTOR PROPOSALS, AND ANY OTHER ARY.
building permit from the appropriate building de improvements. The Architectural Committee shall	over approval of any County or City Code Requirements. A partment is needed on most property alterations and/or have no liability or obligation to determine whether such any applicable law, rule, regulation, code or ordinance.
	ny request for a change, alteration or addition to an existing ns thereto, hereby assume sole responsibility for the repair, lteration or addition.
SUNSTATE MANAGEMENT GROUP, et al, ARE NOT REQUANY SUCH APPROVED CHANGE, ALTERATION OR ADDIT	I BRADEN RIVER HOMEOWNERS ASSOCIATION, INC. AND IIRED TO TAKE ANY ACTION TO REPAIR, REPLACE OR MAINTAIN ION, OR ANY STRUCTURE OR ANY OTHER PROPERTY. THE ISIBILITY AND COST FOR ANY ADDITION OR CHANGE AND ITS
OWNER'S SIGNATURE:	DATE:
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ACTION TAKEN BY THE ASSOCIATION: Approve HOA Approvals good for 6 months from date of approval	Not Approved Date:
AUTHORIZED SIGNATURE(S) - THE HARBORAGE	ON BRADEN RIVER HOMEOWNER'S ASSOCIATION
AUTHORIZED SIGNATURE(S) - THE HARBORAGE	ON BRADEN RIVER HOMEOWNER'S ASSOCIATION

PLEASE SUBMIT TO: teammember5@sunstatemanagement.com P:941.870-4920