

Newport Cove



7751 Stirling Bridge Blvd.
Delray Beach, FL 33446

Architectural Control Board (ACB)
REQUEST FOR ARCHITECTURAL
MODIFICATION
Application Form

Newport Cove Homeowners Association

Date app. form received with
all required documents: / /

ABOVE THIS LINE - ACB USE ONLY

DATE OF ACTION: / /

ACTION: **Approved**
 Rejected

 Signature ACB Chairman

 Signature ACB Member

ABOVE THIS LINE - ACB USE ONLY

Note: For further information about modifications and alterations of your Newport Cove home, please visit our website:
www.newportcovedelray.com then click on ACB tab for detailed information.

- INSTRUCTIONS:**
- In order to make exterior alterations to your property you must submit the applicable items as listed below and have prior ACB Approval before beginning work. Allow at least 30 **DAYS** for application review and processing. Please carefully read and fill out form in its entirety.
- | | |
|---|---|
| 1. This completed application (2) signed copies | 5. Copy of Contractor's Liability Insurance |
| 2. Detailed description, specifications, pictures etc... | 6. Copy of Proposal or Agreement made with Contractor |
| 3. Paint color samples, if applicable (attach to form) | 7. (2) two copies of all attachments |
| 4. Copy of Contractor's License or professional trade certification | |

Owner's Name _____ Property Address _____ Check if owner-builder _____ Lot # _____

Telephone # _____ Email address _____ Name of person or Company performing work _____

• Please select **ONE** of the applicable categories:

<input type="checkbox"/> Exterior Painting	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Garage Door	<input type="checkbox"/> Generator, in ground	<input type="checkbox"/> Mailbox
<input type="checkbox"/> Hurricane Shutters	<input type="checkbox"/> Roof	<input type="checkbox"/> Fence/ Privacy	<input type="checkbox"/> Driveway	<input type="checkbox"/> Screens and patio
<input type="checkbox"/> Other (please explain) _____				

Describe the proposed alteration in detail, include sketch, size, location, color(s), measurements etc...:

• _____

Your application will be processed for approval upon receipt of all items required as listed above. Missing and/or incorrect items will delay processing. Please contact _____ via email with any questions.

• _____

By submitting this application, we agree to the following terms and conditions described below:

If approval is granted, the ACB will assume no liability with regards to structural adequacy, capacity, or safety features of the proposed alterations as submitted. The ACB will not be liable for any work performed. It is the homeowner's responsibility to see that all required licenses and permits are obtained. The homeowner takes full responsibility for all contractors and workers engaged to work on the homeowner's property.

_____	Date: _____	Checklist - items	Duplicates of
x		<input type="checkbox"/> ACB Forms	<input type="checkbox"/> Contractor Liability Ins.
Signature		<input type="checkbox"/> Color Samples	<input type="checkbox"/> Contractor's license
			<input type="checkbox"/> Drawings, detail & specifics