

SILVERLAKES ARCHITECTURAL MODIFICATION REQUEST

Name: _____ Application Date: _____
Community: _____ Lot #: _____
Address: _____ Home Phone: _____

PLEASE USE ONLY ONE FORM FOR EACH MODIFICATION REQUESTED.

Fence _____ Screen Enclosure _____ Storm Shutters _____ Landscaping _____
Pool _____ Patio _____ Satellite Dish _____ Other (Specify) _____

ROOF TILES MAY NOT BE PAINTED OR STAINED!

_____ Driveway stain (must indicate current color of house & roof color) Color sample must be attached. _____ Roof Color
_____ House Painting (must indicate roof color). Samples of new or current colors must be attached.

Description of work, attached additional sheet if necessary.

The following documents are required for reviewing your Architectural Modification form:

All information must be submitted before the committee will review the request.

- A copy of your lot survey with the location of the proposed modifications drawn to scale and indicating all setbacks from the property lines.
- A copy of a proposal, including specifications from the contractor scheduled to do the work.
- If you are doing the work yourself, include a sketch or drawing of the modification.

Prior to submitting the request, please review the architectural standards and guidelines for the SilverLakes Community and insure that your request meets all requirements. All requests must be received in the management office on or prior on the last day of the month to be submitted for the following months meeting.

RESPONSES TO ALL REQUESTS WILL BE SENT BY MAIL WITHIN SEVEN (7) DAYS OF THE MEETING DATE.

Forward this form and all supporting documents to: Pines Property Management, Inc.
P.O. Box 820100
South Florida, FL 33082-0100

HOMEOWNER AFFIDAVIT

I have read & understand the Covenants and Restrictions of the SilverLakes Community Association and agree to abide by them. I understand, and, in return for approval, I agree to be responsible for the following:

- For all losses caused to others, including common areas, as a result of this undertaking, whether caused by me or others;
- To comply with all state or local building codes;
- For any encroachment(s);
- To comply with conditions of acceptance (if any); and
- To complete the project according to the approved plans. If the modification is not completed as approved, said approval can be revoked and the modification shall be removed by the owner at the owner's expense.

I also understand that the Architectural review committee does not review and assumes no responsibility for the structural adequacy, capacity or safety features of the propose construction, alteration or addition; for soil corrosion of uncompactable or unstable soil conditions; for mechanical, electrical or any other technical design requirements for the proposed construction, alteration or addition; or for performance, workmanship or quality of work of any contractor or of the completed alteration or description.

I agree to abide by the decision of the Modifications Committee or Board of Directors. If the modification is not approved or does not comply, I may be subject to court action by the Association. In such event, I shall be responsible for all reasonable attorney's fees.

Signature of Owner: _____ Date: _____
Homeowners Association Recommendations SilverLakes Modifications Committee
_____Approval _____Denial _____Approval _____Denial

SUBMIT ORIGINAL REQUEST (NOT A COPY) TO PINES PROPERTY MANAGEMENT