Eagle Palms HOMEOWNERS ASSOCIATION, INC.

ALTERATION APPLICATION

OWNER'S NAME:	DATE:
ADDRESS:	PHONE:
EMAIL ADDRESS:	
DESCRIBE IN DETAIL, TYPE OF ALTERATION AND MATE	RIALS TO BE USED:
(IF MORE SPACE IS REQUIRED, PLEASE ATTACH TO THI	S FORM. THANK YOU)
An application requesting approval for any alteration who building MUST BE ACCOMPANIED BY A COPY OF YOUR THE LOCATION, SIZE AND A CONTRACTOR'S LISTING OF	R LOT SURVEY WITH A SKETCH INDICATING
If approval is granted, it is not to be construed to a Requirements. A building permit from the appropriate property alterations and/or improvements. The Architects or obligation to determine whether such improvement applicable law, rule, regulation, code or ordinance.	ite building department is needed on mos ural Control Committee shall have no liabilit
As a condition precedent to granting approval of any re an existing basic structure, the applicant, their hires responsibility for the repair, maintenance or replacement IS UNDERSTOOD AND AGREED THAT EAGLE PALT CONDOMINIUM MANAGEMENT GROUP, INC., ARE NOT REPLACE OR MAINTAIN ANY SUCH APPROVED CHASTRUCTURE OR ANY OTHER PROPERTY. THE HOME RESPONSIBILITY AND COST FOR ANY ADDITION OF MAINTENANCE.	s and assigns thereto, hereby assume solot of any such change, alteration or addition MS HOMEOWNERS ASSOCIATION, INC. ANIEQUIRED TO TAKE ANY ACTION TO REPAIR ANGE, ALTERATION OR ADDITION, OR ANEOWNER AND THEIR ASSIGNS ASSUME AL
DATE: OWNER'S SIGNATURE	:
ACTION TAKEN BY THE ASSOCIATIO APPROVED:	
AUTHORIZED SIGNATURE FOR THE ARCHITECTURAL CONTROL COMMITTEE	