

VILLAGE OF DORAL WOODS ASSOCIATION, INC.

ARCHITECTURAL MODIFICATION REQUEST FORM

Owner's Name: _____ Tel: _____

Address: _____

In order to process this application, the following must be included:

1. Sketch of proposed modifications,
2. Appropriate drawings showing both a plan view and an elevation,
3. Specifications of the proposed modifications (color, style, etc.)

Approval is hereby requested to make the following modification(s), or alteration(s) as described below (attach additional pages if needed):

Owner's Signature: _____

Date. _____

FOR BOARD OF DIRECTORS USE ONLY

Date received: _____ Date approved _____

Your request has been approved subject to the following:

- * You are responsible for obtaining any necessary permits from the **CITY OF DORAL**.
- * You are responsible for any damage done to common elements during construction.
- * All construction debris must be removed within 48 hours of completion.

Disapproved: ___ Explanation: _____

BOARD OF DIRECTORS (Signed) _____