

Key Vista Single Family

HOMEOWNERS' ASSOCIATION, INC.

ALTERATION APPLICATION (revised effective 11/22/2016)

OWNER'S NAME: _____ DATE: _____

ADDRESS: _____ PHONE: _____

DESCRIBE IN DETAIL, TYPE OF ALTERATION AND MATERIALS TO BE USED:

(IF MORE SPACE IS REQUIRED, PLEASE ATTACH TO THIS FORM, THANK YOU)

An application requesting approval for any alteration which occurs outside the exterior walls of the building and is, therefore, common element, MUST BE ACCOMPANIED BY A COPY OF YOUR LOT SURVEY WITH A SKETCH INDICATING LOCATION, SIZE AND TYPE OF CONSTRUCTION AND OTHER PERTINENT INFORMATION AS MAY BE NECESSARY. **Please also include a check for \$15.00 made payable to Key Vista Single Family HOA. You may turn this application and accompanying documentation at the office of Key Vista Clubhouse.** Application decisions will be posted at www.mykeyvista.com 48-hours after meeting.

If approval is granted, it is not to be construed to cover approval of any County or City Code Requirements. A building permit from the appropriate building department is needed on most property alterations and/or improvements. The Architectural Control Committee shall have no liability or obligation to determine whether such improvement, alteration and addition comply with any application law, rule, regulation, code or ordinance.

As a condition precedent to granting approval of any request for a change, alteration or addition to an existing basic structure, the applicant, their hires and assigns thereto, hereby assume sole responsibility for the repair, maintenance or replacement of any such change, alteration or addition. **IT IS UNDERSTOOD AND AGREED THAT KEY VISTA SINGLE FAMILY HOMEOWNERS' ASSOCIATION, INC. IS NOT REQUIRED TO TAKE ANY ACTION TO REPAIR, REPLACE OR MAINTAIN ANY SUCH APPROVED CHANGE, ALTERATION OR ADDITION, OR ANY STRUCTURE OR ANY OTHER PROPERTY. THE HOMEOWNER AND ITS ASSIGNS ASSUMES ALL RESPONSIBILITY AND COST FOR ANY ADDITION OR CHANGE AND ITS FUTURE UPKEEP AND MAINTENANCE.**

DATE: _____ OWNER'S SIGNATURE: _____

ACTION TAKEN BY THE ASSOCIATION:

DATE: _____ APPROVED: _____ NOT APPROVED: _____

AUTHORIZED SIGNATURE FOR THE DESIGN REVIEW BOARD

Date sent from office: _____



14914 Winding Creek Court • Tampa, FL 33613 • ph: (813) 374-2363 • fax: (813) 374-2362

www.terramanagers.com

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IMPORTANT INFORMATION FOR ALTERATION APPLICATIONS

The accompanying application form must be completed and must be signed by all owners of the property. Please review the Declaration of Covenants, Conditions and Restrictions for a complete description of your responsibilities regarding Design Review Board requirements and submittals.

Please be advised that all Alteration Applications submitted for review to your Association must be accompanied by a \$15.00 processing fee, made payable to "Key Vista Single Family HOA, Inc." This fee is non-refundable, and a must be received before the application will be considered by the Design Review Board.

The Design Review will act upon your application at their next scheduled meeting. When your application is acted upon, a properly executed copy will be returned to you. **The Design Review Board has up to thirty (30) days after submission of your request to respond. Please keep this in mind when applying for an alteration.**

Under no circumstances is any alteration to begin without the proper approval of your Association.

If you have any questions, please contact your property manager at the telephone number on this form.

THANK YOU FOR YOUR COOPERATION

BOARD OF DIRECTORS



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