

Key Vista Villas Homeowners Association

ALTERATION APPLICATION

OWNER(S) NAME: _____ DATE: _____

ADDRESS: _____ PHONE: _____

EMAIL ADDRESS: _____

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

(If more space is required, please attach additional pages to this form. Thank You)

ESTIMATED DATE OF COMPLETION FOR PROJECT _____

An application requesting approval for any change, alteration or addition 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. IF A CONTRACTOR IS UTILIZED, A COPY OF THE CONTRACT WITH THE NAME, ADDRESS, AND COUNTY OR STATE CONTRACTOR'S LICENSE NUMBER MUST BE PROVIDED WITH THE APPLICATION.**

If approval is granted, it is not to be construed to cover approval of any County or City Code Requirements. A permit from the appropriate department is needed on most property alterations and/or improvements. The Design Review Board shall have no liability or obligation to determine whether such change, alteration or addition complies with any applicable law, rule, regulation, code, or ordinance. **PERMITS ARE THE RESPONSIBILITY OF THE HOMEOWNER AND A COPY MUST BE PROVIDED TO THE DESIGN REVIEW BOARD.**

As a condition precedent to granting approval of any request for the change, alteration or addition to an existing structure or property, the applicant, their heirs and assigns thereto, hereby accept sole responsibility for the repair, maintenance, or replacement of any such change, alteration, or addition. **IT IS UNDERSTOOD AND AGREED THAT KEY VISTA VILLAS HOMEOWNERS ASSOCIATION, INC., KEY VISTA VILLAS DESIGN REVIEW BOARD AND RESOURCE PROPERTY MANAGEMENT, ET AL, ARE 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(S), THEIR HEIRS AND ASSIGNS THERETO ACCEPT ALL RESPONSIBILITY AND COST FOR ANY ADDITION OR CHANGE AND ITS FUTURE UPKEEP AND MAINTENANCE.**

DATE: _____ OWNER(S) SIGNATURE _____

ACTION TAKEN BY THE DESIGN REVIEW BOARD:

DATE: _____ APPROVED _____ NOT APPROVED _____

AUTHORIZED SIGNATURE FOR DESIGN REVIEW BOARD _____

NOTE: APPROVAL OF THIS APPLICATION IS GOOD FOR ONE (1) YEAR. If you have not completed your alteration within that time, another application must be completed and approved.

Key Vista Villas Homeowners Association

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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 as well as the Design Review Manual for a complete description of your responsibilities regarding the Design Review Board requirements and submittals.

You may return this application and accompanying documentation, if any, to:

Key Vista Villas Clubhouse

2910 Wood Pointe Dr.

Please place in the mailbox just inside the door on the left

The Design Review Board 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 receipt of your request to respond. Please keep this in mind when applying for an alteration.**

UNDER NO CIRCUMSTANCES IS ANY CHANGE, ALTERATION OR ADDITION TO BEGIN WITHOUT THE PROPER APPROVAL OF THE DESIGN REVIEW BOARD.

Questions should be directed to:

Beth King

Resource Property Management Company

727-796-5900

THANK YOU FOR YOUR COOPERATION

DESIGN REVIEW BOARD