HOMEOWNER'S AFFIDAVIT DISCLAIMER/RELEASE

I have read, understand, and agree to abide by the Covenants and Restrictions of the Association. In return for approval, I agree to be responsible for the following:

- Construction must be complete within sixty (60) days from the start of construction.
- 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 and local building codes;
- Any encroachment(s);
- To comply with the conditions of acceptance (if any);
- To complete the project according to the approved plans. If the modification is not completed as approved, said approval will be revoked and the modification shall be removed by the owner at the owner's expense.
- Applicant further acknowledges that drainage swales have been designed and established between homes (side yards) to carry storm water off the lot and to maintain positive drainage away from home. The Association and/or developer shall not be responsible for any effect that any proposed landscaping installation or construction may have on drainage. The applicant shall be responsible for all associated costs to restore drainage per original site survey.
- The Homeowner is responsible for any costs associated with irrigation modifications as a result of this alteration.
- The homeowner is responsible for ensuring that all areas affected by the project construction (i.e. landscaping, irrigation, common areas, etc.) are restored to their original condition. The homeowner will be notified of any deficiencies in writing and will be asked to correct any damages. Failing that, the homeowner is responsible for all costs necessary for the HOA to properly restore the area.

All applications must have this affidavit disclaimer/release <u>PLUS</u> vendor license and insurance attached.

I also understand that the ARC does not review and assumes no responsibility for the structural adequacy, capacity or safety features of 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 Architectural Review Board or Board of Directors. If the modification is not completed as approved with the specifications submitted in this application and I refuse to correct or remove the modification, I may be subject to court action by the Association. In such event, I shall be responsible for all reasonable attorneys' fees.

Date	Signature of Homeowner



All Other Requests Checklist

Address	LOT #
	Owner Initials Manager's Initials
ARC Request	
Affidavit	
Survey with Location of request	
Vender Insurance	
Photo of Area	
ASSOCIATION U	JSE ONLY
Has this been approved in the past	Yes No
Location Previous Approval Lot #	
Date:	
Manager's Signature	



ARC Approval Request Form

This request form is to be completed by the homeowner and submitted to the ARC for approval **BEFORE** any work commences. Please refer to your Declaration of Covenants, Conditions and Restrictions for information on the ARC.

*All applications must have the Homeowners affidavit disclaimer/release <u>PLUS</u> vendor license and insurance attached.

If you would like notification sent to alternate address please list below:

THIS SECTION TO BE COMPLETED BY	HOMEOWNER
Name:	Date:
Property Address:	Lot #:
Phone:	Email Address:
	IRCLE ALL APPLICABLE: Landscape Change, Driveway, Gutters, Storm Shutters, Other:
<u>Di</u>	ETAILED DESCRIPTION:
(<u>Attach</u> a copy of a survey map, site plan located)	LOCATION: n with a suitable diagram showing where the addition/change is
used, paint/material color sample(s), Applications submitted without detail	SPECIFICATIONS: I copies of plans, diagrams or pictures of materials to be, landscape drawings showing changes or additions, etc. led specifications will not be reviewed. I zoning and building regulations and include all
SECTION TO BE COMPLETED BY ARCI	HITECTURAL REVIEW COMMITTEE
REQUEST: Date Approved:	Date Denied:
BOARD MEMBER'S SIGNATURE:	
COMMENTS:	

Please Return Completed Form To: ICON Management Service 7155 Grand Estuary Trail, Bradenton, FL 34212

Phone: 941-708-3837