

ARCHITECTURAL MODIFICATION REQUEST FORM
The Villas at Harbor Isles Condominium Association, Inc.

I. OWNER INFORMATION

- **Unit Owner(s):** _____
- **Unit Number:** _____
- **Address:** _____
- **Phone:** _____ **Email:** _____
- **Proposed Start Date:** _____ **Estimated End Date:** _____

II. DESCRIPTION OF MODIFICATION (Check all that apply)

Approval is hereby requested to make the following modification(s), alteration(s), improvement(s) or addition(s) please check and describe all work below :

- Flooring (Must submit soundproofing specs)
- Electrical (Requires licensed electrician)
- Plumbing (i.e. water heater, toilets, new kitchen/bath) (Requires licensed plumber)
- Walls/Structural Changes
- Windows (must meet Association window guidelines, attached below)
- Doors
- Shutters
- Kitchen/Bathroom Cabinets
- HVAC
- Patio Paver Replacement (must meet Association guidelines)
- Other: _____

Detailed Description (Attach additional pages, drawings, pictures if necessary):

III. CONTRACTOR/VENDOR INFORMATION

- **Company Name:** _____
- **License Number:** _____
- **Phone/Email:** _____

IV. REQUIRED ATTACHMENTS (Checklist)

In order for the Association to properly review your request, you must include such details as the dimensions, materials, colors, design, location, pictures or any other pertinent data, such as drawings, surveys and the NOA'S, (product approval), from Broward County. Ceramic tiles and hardwood flooring require installation of adequate soundproof material underneath. Attach a sample. Copies of Contractors' License, address, phone, and current Certificate of Insurance, listing the Association as an insured must be attached. All contractors are responsible for removal of all debris. No debris is to be disposed of in the dumpsters or dumpster area.

- Detailed plans/sketches/samples of materials
- Contractor's license
- Certificate of Liability Insurance (naming Association as additionally insured)
- Copy of required City/County Permits

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V. OWNER AGREEMENT

Homeowner's Affidavit:

1. I have read the covenants and restrictions of the Association and agree to abide by such covenants and restrictions.
2. I agree not to proceed with request until I receive the prior written consent of the Board of Directors.
3. I agree that if the modification is not completed as approved, said approval can be revoked and the modification removed at the owner's expense.
4. I will in no way alter, modify or cause damage to any common areas or common structures. I agree that I shall be wholly and fully liable and responsible for any and all damage done to common areas as a result of the modification.
5. I agree to abide by the decision of the Board of Directors.
6. I agree to comply with State and County building and electrical codes.
7. I agree to obtain all necessary permits, (if applicable), and provide same to the Board of Directors.
8. No work can commence until written approval is received

Owner Signature: _____ **Date of Request:** _____

FOR BOARD USE ONLY

Approved Approved with Conditions Disapproved

Conditions: _____

Name: _____

Title: _____

Authorized Signature: _____ Date: _____

“Certificate-of-Insurance” Agreement

Vendor Name

phone number

Vendor Company

email address

In order to provide services to/or at **The Villas AT Harbor Isles** , we require an ACORD 25 Certificate-of-Insurance form (COI). All insurers must be “A” rated or better, by AM Best. The policy period must take effect on or before your first date of service and continue through your last date of service.

Please forward the COI prior to commencement of business to thevillaspm@campbellproperty.com The COI should include the following minimum coverage, *as applicable*:

- ➔ General Liability: \$1,000,000 per occurrence.
- ➔ General Aggregate: \$2,000,000 OR
Excess Liability: \$1,000,000 per occurrence / aggregate
- ➔ Worker’s Compensation: as required by statute. Or workers Comp exempt
- ➔ Employer’s Liability: \$500,000 each accident
- ➔ Auto Liability: \$500,000 OR \$1,000,000 (if vendor transports guests)

DESCRIPTION OF OPERATION - For all policies except Worker’s Compensation, the COI must include the entities listed below, as additional insureds. *Only the wording below is acceptable.*

The Villas AT Harbor Isles Condo Assn INC, all divisions, parents, affiliates, subsidiaries, sole partnerships, corporations, trust, joint ventures, managers, officers, directors and employees are named as additional insureds, with respect to the operations of the named insured, on a primary / non-contributory basis. Waiver of Subrogation endorsement in favor of the Additional Insureds. 30 day Notice of Cancellation required.

WAIVER OF SUBROGATION ENDORSEMENT - All insurance policies must include this wording in favor of the additional insureds as listed in the Description of Operation, above.

CERTIFICATE HOLDER - Please list as below:

Attn: **The Villas AT Harbor Isles Condo Assn INC**
Address: **2317 Clipper Place**
Dania Beach FI 33312

In consideration of payment for your services, it is understood that your signature below, constitutes a written contract containing the above insurance requirements.

Vendor Signature

Date

*THE SHERWIN WILLIAMS CO.
2733 HOLLYWOOD BLVD
HOLLYWOOD FL 33020 4821*

Visit www.sherwin-williams.com

Store 702384

(954) 922-5882

Fax: (954) 922-5889

SHERWIN-WILLIAMS 702384 02/04/21
954-922-5882 Order# 0300153

EXTERIOR ARCHITECTURAL
RESILIENCE LATEX
SATIN FM 8000XL

TRIM
CUSTOM MANUAL MATCH

CCE*COLORANT	OZ	32	64	128
B1-Black	-	5	-	1
R2-Maroon	-	3	-	-
Y3-Deep Gold	-	36	1	1

ONE GALLON EXTRA WHITE
K43H00051 640413548

STUCCO/MASONRY

NOT RECOMMENDED FOR USE ON VINYL

Non Returnable Tinted Color
CAUTION: To assure consistent color,
always order enough paint to complete
the job and intermix all containers
of the same color before application.
Mixed colors may vary slightly from
color strip or color chip.



0300153-003

SHERWIN-WILLIAMS 702384 02/04/21
954-922-5882 Order# 0300153

EXTERIOR ARCHITECTURAL
RESILIENCE ACRYLIC
SATIN FM 8000XL

TAN
CUSTOM MANUAL MATCH

CCE#COLORANT	OZ	32	64	128
W1-White	4	37	-	1
B1-Black	-	9	1	1
R2-Maroon	-	11	-	1
Y3-Deep Gold	4	5	1	-

ONE GALLON DEEP
K43W00053 640413589

STUCCO/MASONRY

NOT RECOMMENDED FOR USE ON VINYL

Non Returnable Tinted Color

CAUTION: To assure consistent color, always order enough paint to complete the job and intermix all containers of the same color before application. Mixed colors may vary slightly from color strip or color chip.



0300153-001

SHERWIN-WILLIAMS 702384 02/04/21
954-922-5882 Order# 0300153

EXTERIOR ARCHITECTURAL
RESILIENCE LATEX
SATIN FM 8000XL

GREEN
CUSTOM MANUAL MATCH

CCE*COLORANT	OZ	32	64	128
G2-New Green	2	6	1	1
R2-Maroon	-	33	1	1
Y3-Deep Gold	2	55	-	1

ONE GALLON EXTRA WHITE
K43W00051 640413548

STUCCO/MASONRY

NOT RECOMMENDED FOR USE ON VINYL

Non Returnable Tinted Color

CAUTION: To assure consistent color, always order enough paint to complete the job and intermix all containers of the same color before application. Mixed colors may vary slightly from color strip or color chip.



0300153-004

SHERWIN-WILLIAMS 702384 02/04/21
954-922-5882 Order# 0300153

EXTERIOR ARCHITECTURAL
RESILIENCE ACRYLIC
SATIN FM 8000XL

TERRA COTTA
CUSTOM MANUAL MATCH

CCE#COLORANT	OZ	32	64	128
B1-Black	-	9	-	1
N1-Raw Umber	-	43	1	1
R2-Maroon	-	44	1	-
Y3-Deep Gold	4	30	-	-

ONE GALLON DEEP
K43W00053 640413589

STUCCO/MASONRY

NOT RECOMMENDED FOR USE ON VINYL

Non Returnable Tinted Color

CAUTION: To assure consistent color, always order enough paint to complete the job and intermix all containers of the same color before application. Mixed colors may vary slightly from color strip or color chip.



0300153-002





Window Specifications

Approved Window Specifications:

- Single-Hung Window (only opening up and down only)
- Glass: 1/8" gray glass
 - Muntin / Grille: Required
 - The muntin or grille is the decorative strip dividing a single pane of glass into smaller panes and is part of the approved design.
- White Frame
- Impact Windows: If installing impact windows, they must also be gray glass and include the muntin/grille to match the community's original aesthetic.

Please ensure all window replacements are submitted through the Architectural Review Committee (ARC) for proper approval prior to installation.

Thank you for your cooperation in maintaining the community's standards.