



Welleby Management Association Inc.
4570 N Hiatus Road, Sunrise, FL 33351
954-749-6228 * fax 954-748-2440 * info@welleby.net

ACCT # _____

ARCHITECTURAL MODIFICATION REQUEST (all exterior modifications)

NAME _____ ADDRESS _____ SR 33351

SUB-ASSOCIATION (if any) _____

EMAIL _____ PHONE(S) _____

NOTIFICATION SHOULD BE SENT TO MY: ☐ EMAIL ☐ ADDRESS ☐ OTHER _____

Please describe the requested modification below (include details such as manufacturer, color, material, dimensions, location, etc.)
USE A SEPARATE FORM FOR EACH MODIFICATION IF MULTIPLE CHANGES ARE BEING MADE

I have attached the following documentation:

- ☐ Lot survey (REQUIRED IF NEEDED TO SHOW A LOCATION)
- ☐ Color picture of front of house (REQUIRED FOR PAINTING/ROOFING/LANDSCAPING/DRIVEWAYS/SHUTTERS/DOORS)
- ☐ Paint swatches (REQUIRED FOR PAINTING, manufacturer sample with name/number of color) & color locations

I UNDERSTAND THAT THIS REQUEST WILL NOT BE CONSIDERED COMPLETE/SUBMITTED AND WILL NOT BE REVIEWED UNTIL ALL REQUIRED DOCUMENTATION (INCLUDING SUB-ASSOCIATION APPROVAL IF APPLICABLE) IS SUBMITTED. Approvals are valid for **180 days** unless the request is in response to a violation which must be resolved within 30 days of the date of an approval. I agreed to and will comply with all city, county and other governmental regulations and will obtain any applicable permits.

Signature of owner: _____ Date: _____

-DO NOT WRITE BELOW THIS LINE, FOR ASSOCIATION USE ONLY-

SUB-ASSOCIATION NAME _____
(MUST BE SIGNED BELOW BY A AGENT OF THE SUB-ASSOCIATION OR LETTER OR APPROVAL MAY BE ATTACHED)

Approved ()

Disapproved ()

DATE _____

SIGNATURE _____ PRINT NAME _____

WELLEBY MANAGEMENT ASSOCIATION USE ONLY

Approved ()

Disapproved ()

DATE _____

SIGNATURE _____ FOR THE BOARD OF DIRECTORS

ROOF FLASHING (ALSO CALLED DRIP EDGE) MUST BE PAINTED TO MATCH FASCIA BOARD

