

**YORKSHIRE POA, INC.
ARCHITECTURAL & LANDSCAPE REQUEST FORM**

OWNERS NAME: _____ **PHONE:** _____

UNIT ADDRESS: _____ **LOT NUMBER:** _____

CONTRACTOR: _____ **PHONE:** _____

ESTIMATED START/COMPLETION DATE _____ / _____ **Requests not completed within 90 days of the approval date must be resubmitted.**

REQUEST (include all attachments): _____

INSTRUCTIONS

1. A sketch of the proposed request must be attached to this form along with the contractor's proposal, detailing materials, color, and distance from the foundation of the unit. Dimensions need to be shown to define location. All landscape requests must include type, number and size (initial and maximum height and width the plantings will be maintained at). **Written information submitted without sufficient detail needed to define proposed improvements will be returned without approval.**
2. Attach a site plan showing the sitting of the Dwellings on each site of your unit.
3. Any planned changes or impacts to original lot drainage and/or sprinkler system must be presented with required solutions. All irrigation changes **MUST** be performed by ValleyCrest. If a slab or other ground work is proposed, Management will contact ValleyCrest to survey the area for irrigation lines. Only ValleyCrest may move or cap irrigation lines or sprinklers. If work is completed prior to ValleyCrest reviewing the irrigation system, the unit owner is responsible for all expenses related to any irrigation line damage and/or future repairs should a line running under alteration break.
4. Each page is to be numbered and signed by all adjacent neighbors and the Architectural Committee members and/or Board Members evaluating your request.
5. All improvements need to comply with applicable codes and regulations, policies, maintain aesthetics, drainage, structural, mechanical, etc, conditions without obstructing other residents rights.

By my signature below, I understand that maintenance, repair and/or replacement of and insurance for any requested alteration, or improvement is my responsibility (even if damage is caused by a common element) in accordance with the Declaration of Condominium, Article XIV MAINTENANCE AND ALTERATIONS, and any amendments thereto or duly adopted rules of the Board of Directors and shall be binding upon the unit owner, his heirs, executors, administrators, successors, and assigns. Removal of a modification may be requested by the Board, at my expense, should the modification become a nuisance.

UNIT OWNER(S) SIGNATURE

UNIT OWNER(S) SIGNATURE

DATE SIGNED

OVER →

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Architectural Committee Action

Landscape Committee Action

Approved Disapproved _____

Approved Disapproved _____

Date

Date

1. _____

1. _____

2. _____

2. _____

3. _____

3. _____

BOARD OF DIRECTORS ACTION

BOARD SIGNATURES:

APPROVED DATE:

DISAPPROVED DATE:

1. _____

2. _____

COMMENTS: _____

3. _____

Neighbors who would have a direct view or be affected by the change must sign below, showing they have approved the change. Use the back of this form is necessary. **By our signature below, we approve the change as requested above.**

Signature(s)

Address

Date

1. _____

2. _____

3. _____

4. _____

Management reviews Alteration Request for completeness and vendor adherence to license and insurance requirements. Management review does not supersede your Board's decision. Board Action is no substitute for unit owner vote, if required. Management assumes no responsibility for alteration including vendor or materials. Management makes no representation that alterations are permissible under the Associations governing documents, Florida Statute 720 or any other governing body, without a written legal opinion.

REVIEWER: _____

Date: _____

Copy to Unit Owner: Date: _____

Copy to Board: Date: _____

Copy to ValleyCrest (if required) Date: _____