

White Egret Condominium, Inc.
ARCHITECTURAL MODIFICATION APPLICATION FORM

DATE: _____ ADDRESS: _____

APPLICANT(S): _____

TELEPHONE #: (1) _____ (2) _____ (EMAIL) _____

TYPE OF MODIFICATION BEING REQUESTED (Please describe in detail. Include materials and colors used, as well as size.):

PLEASE NOTE: It is the sole responsibility of the OWNER to ensure that the submitted package is complete. The following items must be included with your application in order to be considered for approval. If any items are missing the package is considered incomplete and will not be reviewed by the Committee or Board of Directors. The OWNER also acknowledges that Association Specialty Group is also not responsible for incomplete packages. The owner is responsible to submit completed packages and the Association is NOT responsible for providing and approval/disapproval within the required time frame of any incomplete packages.

- ARCHITECT'S PLANS/ DRAWINGS (if applicable) & BOUNDARY SURVEY (if exterior of home/unit)
- SAMPLES OF MATERIALS (actual material, where feasible, as well as paint chip or color swatches)
- COPY OF CONTRACTORS' LICENSE & INSURANCE (See Page 3 for Specific Details)
- MUNICIPAL BUILDING PERMITS MUST BE SUBMITTED FOR THE FOLLOWING TYPES OF WORK
 - Examples: (Electrical, Plumbing, Signs, Pools, Mechanical, Window, Shutters, Roofing, Floor Installation with need for Sound Proofing)
 - The issuance of the permit does not relieve the property owner from obtaining the Association's approval and in no way authorizes Work that is in violation of any Association Rule & Regulation.

I / We hereby make application to **White Egret Condominium, Inc.** for the above described item to be approved in writing.

I / We understand and acknowledge that approval of this request must be granted before Work on the modification may commence and that if modification/installation is done without the approval of the Association, the Association may require the removal of the modification/installation and subsequent restoration to original form at my expense.

_____/_____
Applicant Date Applicant Date

(ASSOCIATION: This section for internal office use only)

Reviewed By:	Approved	Rejected	Comments

C/o Association Specialty Group
9050 Pines. Blvd. Ste., 480, Pembroke Pines, FL 33024
Ph: 954-458-5557 & Fax: 954-458-5056 & rs1@asgflorida.com
Website: www.managingflorida.com

White Egret Condominium, Inc.
RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

This Release, indemnification and Hold Harmless Agreement ("Release") is executed this _____ day of _____, 20__ by the undersigned Owner(s) or Lessee(s) of Unit _____ located in the White Egret Condominium, Inc. (hereinafter referred to as the "Association").

Whereas, the Association will permit the undersigned to engage contractors and vendors (including all those Working by, through, or under them, the "Personnel") to perform Work within the undersigned's Unit subject to the terms and conditions set forth hereinafter. The contractor must submit a current certificate of insurance for general liability insurance with limits of at least **\$1,000,000.00** and **White Egret Condominium, Inc.** and additional named insured; a current certificate of applicable Workers Compensation Insurance will be required; a copy of applicable licenses and required permits.

Now, Therefore, in consideration for being permitted the benefit of allowing the Personnel to perform Work within the undersigned's Unit and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the undersigned specifically agree to the following:

1. The above recitals are true and correct and are incorporated herein by reference.
2. The undersigned acknowledge that the Work performed by such Personnel within their Unit shall be at the undersigned's sole risk and the Association shall not have any responsibilities or liability for the Work performed by such Personnel and further acknowledge and agree that the Association has made no representations regarding the Personnel's ability or qualifications to perform the Work.
3. The undersigned acknowledges and agrees that the Work performed by such contractor or vendor within their Unit shall be at the undersigned's sole risk and the Association shall not have any responsibilities or liability for the Work performed by such contractor or vendor and further acknowledge that the Association has made no representations regarding the contractor or vendor's ability or qualifications to perform the Work.
4. The undersigned (jointly and severally of more than one) hereby release, indemnify and hold harmless the Association and its directors, officers, agents and employees, lessees, guests and invitees and all members of the Associations from and against all claims, damages, losses and expenses including attorney's fees, at both the trial and appellate level, arising out of or resulting from the contractor or vendor's entry to the undersigned's Unit and the Work performed by, through or under them. This indemnification shall extend to all claims and damages, including consequential damages, losses and expenses attributable to bodily injury, death, and to damages, theft or injury to and destruction of real or personal property including loss of use arising out of or resulting from the Work performed by the contractor or vendor and entry into the undersigned's Unit.
5. We have read this Release and understand and agree to all of its terms. We execute it voluntarily and with full acknowledge of its significance.

Owner 1: _____ Date: _____

Owner 2: _____ Date: _____

White Egret Condominium, Inc.

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CONTRACTOR'S INSURANCE/LICENSE/AUTHORIZATION

- 1 To protect yourself and **COMMUNITY NAME**, from liability exposure, all contractors doing Work in your apartment (i.e. – decorators, flooring companies, etc.) must be licensed and insured.
2. A copy of each of the following must be on file with the Management Office, prior to the contractor commencing Work:
 - a. **Current Certificate of Insurance for General Liability Insurance with limits of at least \$1,000,000.00 and COMMUNITY NAME as an Additional Named Insured and as a Certificate Holder.**
 - b. **Insurance - Certificate Holder Must State**
 - i. **White Egret Condominium, Inc.**
 - ii. **C/o Association Specialty Group**
 - iii. **9050 Pines Blvd. Ste. 480**
 - iv. **Pembroke Pines, FL 33024**
 - c. **Current Certificate of Applicable Worker's Compensation and White Egret Condominium, Inc. on the Certificate**
 - d. **License and applicable permits in accordance with Association and City County State Regulations**
 - e. **PLEASE NOTE THAT ANY SUBCONTRACTOR USED TO COMPLETE THE PROJECT MUST ADDITIONALLY PROVIDE INFORMATION FOR LICENSE & INSURANCE OR THE GENERAL CONTRACTOR MUST SHOW PROOF OF INSURANCE COVERING THE SUBCONTRACTOR.**
3. All required permits must be submitted with ARCH Package (as applicable per city/county regulation) and posted prior to commencement of Work.

Thank you in advance for your cooperation in protecting your home.

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