

# Attn: Board of Directors - Kings Park Condominium Garden Apartments, Inc.

4025 North Federal Highway | Oakland Park, FL 33308

## REQUEST FOR ARCHITECTURAL MODIFICATION

*This form must be fully executed and approved before any architectural modifications can be made.*

### Owner Information

Name: \_\_\_\_\_ | Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ | Unit Number: \_\_\_\_\_ | Building: \_\_\_\_\_

### Description of Modification:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Contractor Information

Company: \_\_\_\_\_ | Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
| Email: \_\_\_\_\_  
Phone: \_\_\_\_\_ | License Number: \_\_\_\_\_

**IMPORTANT: Please submit a copy of the contractor's business license and proof of insurance listing Kings Park Condominium Garden Apartments, Inc. as an additional insured as well as a copy of the permit (if applicable).**

Has a PERMIT been applied for?  YES  NO

*The Board has the right to rescind approval if a required permit is not obtained from or approved by the City of Oakland Park.*

Approval is hereby requested to make the above-mentioned modification, alterations or additions as described and depicted above, or on additional pages included herewith. Details such as dimensions, materials, color, design, location, drawings or pictures, and any other pertinent data are required to be submitted. I understand that any damage to any property created by the contractor during the completion of said alteration shall become my responsibility to correct. I also understand that the maintenance, replacement, and insurance of the change applied for is my responsibility, and the approval for such change or addition can be revoked if it interferes with or damages adjoining property. If the change or addition causes damage to a common area, I understand the expense of necessary repairs is mine.

Unit Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

----- >> THIS SECTION TO BE COMPLETED BY THE KINGS PARK BOARD OF DIRECTORS << -----

Date Reviewed: \_\_\_\_\_ |  YES  NO

Board Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_