

Hidden Cove of Davie Condominium Association, Inc.

C/o Renaissance Management Group, Inc,
1773 N. State Road 7, Lauderhill FL 33313

ARCHITECTURAL MODIFICATION APPLICATION FORM

Unit owner/applicant(s): _____

Unit #: _____ Phone Number: (1) _____ (2) _____

Email: (1) _____ (2) _____

TYPE OF MODIFICATION BEING REQUESTED (Please describe in detail - include materials, colors used, and sizes):

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:

- ✓ 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 & CERTIFICATE OF INSURANCE (See Page 3)
- ✓ MUNICIPAL BUILDING PERMITS MUST BE SUBMITTED FOR THE FOLLOWING TYPES OF WORK:
Electrical, Plumbing, Signs, Pools, Mechanical, Window, Shutters, Roofing, Sound Proofing Floor Installation.
 - o P.s.: 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.

PLEASE NOTE: It is the sole responsibility of the OWNER to ensure that the submitted package is complete. The OWNER also acknowledges that Renaissance Management Group, Inc. 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.

I / We hereby make application to **Hidden Cove of Davie Condominium Association, 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 force the removal of the modification/installation and subsequent restoration to original form at my expense.

Signature Applicant 1: _____ Date: _____

Signature Applicant 2: _____ Date: _____

ASSOCIATION - OFFICE USE ONLY

☐ Approved ☐ Rejected	
Reviewed By: _____	Title: _____
Signature: _____	Date: _____
Comments: _____	

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

This Release, indemnification and Hold Harmless Agreement ("Release") is executed this ____ day of _____ of 20____ by the undersigned Owner(s) or Lessee(s) of Unit _____ located in the Hidden Cove of Davie Condominium Association, 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 and Hidden Cove of Davie Condominium Association, 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 our 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 its terms. We execute it voluntarily and with full acknowledge of its significance.

Signature Applicant 1: _____ Date: _____

Signature Applicant 2: _____ Date: _____

CONTRACTOR'S INSURANCE/LICENSE/AUTHORIZATION

To protect yourself and **Hidden Cove of Davie Condominium Association, Inc.** from liability exposure, all contractors doing work in your apartment (i.e. – decorators, flooring companies, etc.) must be licensed and insured. A copy of each of the following must be on file with the Management Office, prior to the contractor commencing work:

1. Current **Certificate of Insurance for General Liability Insurance** with limits of at least \$1,000,000.00 and **Hidden Cove of Davie Condominium Association, Inc.** as an Additional Named Insured and as a Certificate Holder.

Certificate Holder Must State:

C/O Renaissance Management Group, Inc.
1773 N State Road 7
Lauderhill, FL 33313

2. Current **Certificate of Applicable Worker's Compensation** and **Hidden Cove of Davie Condominium Association, Inc.** on the Certificate.
3. **Business License** and applicable permits in accordance with Association and City County State Regulations
4. All required permits must be submitted with ARCH Package (as applicable per city/county regulation) and posted prior to commencement of work.
5. **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.**

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

