

APPLICATION AND APPROVAL FORM

NAME: _____
ADDRESS: _____
PHONE: (H) _____ (W) _____ (C) _____
E-MAIL ADDRESS: _____

Incomplete applications will not be accepted in the office for processing, they will be returned to owner.

OWNER'S SUBMISSION CHECK LIST: The more complete your application is, the faster the review.

- Color Swatches (**ACTUAL**)/PAINT SAMPLES - **Select from Sub Assoc. Approved Schemes..**- new/ current/ old colors and list the Scheme #'s.. (**Specify: Base, doors (Garage & other), and trim/accnt**)
- ROOF TILE:** color photo from Sub Association Approved List of Roof Tiles (new or existing color)
- Property "lot" Survey / **COMPLETE** plans - **Scope of work/Contract** (no figures) /drawings /photos
- "Dial 811 before digging, it's the law"**
- Pre-approval from the Central Broward Water Management District (If Required, lake property)
- Pre-approval from the Town of Davie Engineering Department (if Required)
- Pre-approval from the Town of Davie Arborist for removal of trees (if Required)
- Approval letters from neighbors and letters of reason (where applicable).
- Homeowner's Signature and contact numbers.
- Proof of current Venders License (If using a contractor) **NO VENDER SIGNS PERMITTED!**
- Proof of current Venders Insurance (If a using contractor) to include **in the "Certificate Holder Box" on the bottom left: YOUR name, Sub Association name, AND Forest Ridge Master Homeowners Association or Property Management Company.**

All contractor vehicles (for East Side of Forest Ridge community areas) must enter/exit on Nova Dr. & Grove Dr.. NOT Pine Island Rd/. Forest Ridge Blvd.

SUBMISSION REQUEST: Please provide full details of your project/submit separate forms for each project.

Approval is hereby requested to make the following modifications, alterations or additions to my home or lot. In making this request, I hereby agree to repair any damage caused to common or limited common areas as a result of this work and will restore these areas to their original condition within two (2) weeks of completion:

OAK GROVE RESIDENTS: Submit complete ARB applications to: Jay Jenkins, Property Manager

c/o Atlantis Management Services, LC
11011 Sheradon St.,#201,Cooper City, Fl 33026
FRMHOA ARB 9/26/19

***** Homeowner's Signature *****

Subdivision: _____ Lot: _____

DATE: _____ DATE RECEIVED: (Official Use Only) _____

Date first received at sub: _____ Application not completed, contact owner: _____

APPROVED: Subdivision Board _____
Forest Ridge Master _____

DENIED: Subdivision Board _____
Forest Ridge Master _____

Letter Comments: (ARB/HOA office use only) _____

Applications are valid for 1 year. All modifications must be completed within 12 months from the date of approval; otherwise a new COMPLETE application must be submitted. For specific details, refer to the Declaration of Restrictions and Protective Covenants under the Architectural Control Section: Ref to [http:// www.fsrssouth.fsrconnect.com/your community name](http://www.fsrssouth.fsrconnect.com/your_community_name) to review complete guidelines and download ARB form. Contact property manager for assistance.