

BUCKHEAD OF ORLANDO HOA, INC

Architectural Modification Application Form

Date: _____
Unit Owner(Applicant): _____
Address: _____
Telephone #: _____ Cell#: _____
Email: _____
Type of Modification being requested (Please describe in detail)

Are these modifications TEMPORARY or PERMANENT? (circle one)

Start date: _____ Completion date: _____

Architectural plans and drawings and/or material specifications must be attached before application will be considered.

I/We hereby make application to the Buckhead of Orlando HOA, 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 approval of the Association. The Association may force the removal of the modification/installation and subsequent restoration to original form at my expense.

Applicant Signature: _____

Applicant Signature: _____

Application Approved	<input type="checkbox"/>
Denied	<input type="checkbox"/>
X _____	
Date: _____	
Additional Contingencies:	

FLARENT, INC.
1488 SEMINOLA BLVD
CASSELBERRY, FL 32707
407-339-5797 * 407-339-6763 FAX