LAKE CLAIR PLACE HOMEOWNERS ASSOCIATION

PO BOX 120463 CLERMONT, FL 34712

[www.lakeclairplace.org](http://www.lakeclairplace.org)

REQUEST FOR APPROVAL TO MODIFY PROPERTY

NAME OF APPLICANT(S)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS OF PROPERTY OWNER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In accordance with the Design Control Committee of the Declaration of Covenants, Restrictions and Easement or Declaration of Condominium to which I belong, I hereby request approval for the following Modification: (Describe here the modification requested)

Applicants Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1 Please consult the Lake Clair Place Covenants. Restrictions and Easements document located on the website listed above.

2 Any changes to the original appearance and/or color to the exterior of the lot must be submitted for approval. If changing any color(s) to exterior of house submit paint swatch marked with color choices. If putting up new or replacing old fencing include picture and specifications of kind, type, height, shape, and color of fencing. If planning a home addition or addition of a structure to the lot, submit (2) complete sets of plans and specifications prepared by an architect, landscape architect, engineer or other qualified person and attach to this application.

3 Information contained in these plans and specifications must show the nature, kind, shape, height, materials, color scheme and location of the requested change or alteration, depending on the type of modification requested.

4 As a condition of precedent to granting any request of a change, alteration or addition, the applicant, his/her heirs and assigns, hereby assumes sole responsibility for repair, maintenance or replacement of any such addition , alteration, or change and shall indemnity and hold the Association harmless from and against all claims, causes of actions and expenses (including attorney’s fees) made against the Association in connection with, or as a result of, the modification to be performed under this request.

5 The applicant assumes all responsibility for any infringement on or interference with existing facilities and easements on the property.

6 An approval or denial will be delivered within 30 days after the Association’s receipt of this request together with all required materials.

7 Approval of this request does not constitute approval of the structural integrity of the requested modification, and is intended solely to maintain harmonious visual aesthetics within the community.

8 The applicant must obtain all applicable governmental permits and/or approvals from Lake County officials and abide by all applicable county and state ordinances, laws and regulations (if applicable)

9 Upon completion of this form please forward a copy to the President and copy the Secretary at email address listed on [www.lakeclairplace.org](http://www.lakeclairplace.org) or mail this form with any attachments to the PO box listed above. Thank you, the Board of Directors.

ACTION TAKEN – Your request is:

APPROVED\_\_\_\_\_ CONDITIONALLY APPROVED \_\_\_\_\_\_ DISAPPROVED \_\_\_\_\_\_ INCOMPLETE \_\_\_\_\_\_\_

The following additional information is required or approval is conditioned upon:

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_