



VINYL FENCE ARCHITECTURAL MODIFICATION REVIEW REQUEST

****** Please allow up to a minimum of 30 days from submittal for approval ******

From: (Owner's Name) _____ Lot # _____
Address: _____
Home Phone: _____ Cell Phone: _____
E-mail Address: _____

This option is available on perimeter lots and canal lots up to the property line and Lake Lots only on side yard.

Material: Vinyl **Color:** Match house stucco color or trim **Style:** Shadow Box or Solid
Height: Minimum 4 ft., Maximum 6 ft. (Circle Choice)

- All forms must have a copy of the survey attached with a sketch showing fence placement.
- All forms must be signed by each party on the deed of the property.

I am agreeing to comply with each of the following by initialing in front of each line item:

- _____ 1. That if the modification is not completed as approved, said approval can be revoked and the modification(s) will be required to be addressed at the owner's expense immediately.
- _____ 2. To comply with all state, county and city building codes to obtain necessary permits if applicable.
- _____ 3. That I am responsible to pay for any repair and all damage(s) done to the common areas as a result of the installation. (**Must call 811 before any digging/excavating.**)
- _____ 4. Installation will be completed by a licensed and insured fence professional unless owner/builder permit is obtained.
- _____ 5. Please submit a copy or proof of county final approval upon completion.

_____ Date work will begin: _____
Owner's Signature Date Date work will finish: _____

Submit/mail completed form(s) to: Gateway Gardens HOA office
4777 Gateway Gardens Dr., Boynton Beach, FL 33436.
Email: gatewaygardenshoa@gmail.com; **Phone:** (561) 364-4118
HOA website www.gatewaygardenshoa.com

When the work/modification is completed, homeowner should notify HOA within 14 days of completion to schedule a final inspection.

Date Received: _____
Approved by _____ Date _____ Not Approved by _____ Date _____

Comments: _____
