

**RIVER RUN OF SEBASTIAN CONDOMINIUM ASSOCIATION, INC.**  
**REQUEST FOR REVIEW**  
**FOR ARCHITECTURAL MODIFICATION**

OWNER'S NAME: \_\_\_\_\_

RIVER RUN ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DAY PHONE: \_\_\_\_\_ EVENING PHONE: \_\_\_\_\_

Approval is hereby requested to make the following modification(s), alteration(s), or additions(s) as described and depicted below, or on additional attached pages as necessary. (Please include such details as the dimensions, materials, color, design, location and other pertinent data.)

- 1) Must provide explanation of architectural change.
- 2) Must provide copy of proposal/contracted work.
- 3) Must provide proof of contractor's license.
- 4) Must provide proof of contractor's liability & workers comp. insurance.

\_\_\_\_\_  
Date of Request

\_\_\_\_\_  
Signature of Owner

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DATE RECEIVED \_\_\_\_\_  APPROVED  DISAPPROVED

DATE NOTIFIED \_\_\_\_\_  APPROVAL LETTER SENT

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please return directly to Elliott Merrill Community Management**  
**[cheric@elliottmerrill.com](mailto:cheric@elliottmerrill.com) or fax 772-569-4300**  
**for processing with the River Run Board of Directors.**