



Daylesford Lake Condominium Association
183 Daylesford Blvd
Berwyn, Pa 19312
(610) 407-4347

ARCHITECTURAL & LANDSCAPING REQUEST FORM

NAME: _____ **(PLEASE PRINT)**

ADDRESS: _____

PHONE: HOME: _____ **WORK:** _____ **CELL:** _____

Please state as concisely as possible the nature of the request to be considered. Include all proposed exterior additions and/or landscaping changes for which approval must be obtained. Cite any architectural guidelines, which will be relevant to the Board of Director's decision.

Description and Specifications: _____

USE THE OTHER SIDE FOR A SKETCH OR SUBMIT PLANS ON A SEPARATE PAGE.

WORK TO BE COMPLETED BY: _____

If contractor, state name and address

If a contractor will be performing the work, I/We will obtain from the Contractor a certificate of insurance naming me/us, together with Daylesford Lake Condominium Association named therein as additional insured, evidencing that the Contractor has in full force and effect, at the time the work is performed, motor vehicle and general liability coverage, and workers compensation insurance in the statutory amounts, all in accordance with the attached Compensation and Liability Insurance Requirements, which will be submitted as part of this request. I/We are responsible for the entire installation, maintenance, use and upkeep (replacement, insurance, etc.) of the improvements subject of and affected by this request. If the Architectural request is approved, the approval will be made part of the Unit file and will be disclosed in the event of any resale of the Unit. *By filing the application and undertaking the work, I/We on behalf of myself (ourselves) and all of my heirs and assigns, agree to be fully responsible, and will indemnify and hold harmless the Association, for any claims related to removal, installation, use, maintenance and operation of the above architectural or landscaping change.*

Date: _____ **Signature:** _____

