



**DELRAY ESTUARY HOMEOWNERS ASSOCIATION, INC.**

c/o Tallfield Management  
12765 Forest Hill Blvd; Suite 1320, Wellington, FL 33414  
Office: 561-983-6000 estuary@tallfield.com

FOR OFFICE USE ONLY: **ALC** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ( )

**APPLICATION FOR BUILDING/STRUCTURAL MODIFICATIONS**  
PLEASE READ THE DIRECTIONS ON PAGE 2 OF THIS FORM BEFORE COMPLETING THIS APPLICATION

Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Numbers: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Contractor(s) \_\_\_\_\_

Address \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Brief description of modifications and additions: (attach separate sheet if necessary)

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

Estimated start date \_\_\_\_\_ Estimated completion date \_\_\_\_\_

**CHECK LIST OF REQUIRED DOCUMENTS ACCOMPANYING THIS APPLICATION:**

**FROM YOUR CONTRACTOR:**

- Copy of signed agreement from your contractor showing total cost
- Copy contractor's Certificate of Liability
- Copy of contractor's Workman's Compensation Insurance Certificate
- Copy of contractor's City or State Business License

**DAMAGE DEPOSIT CHECK**

Attach refundable damage deposit check for 20% of the total cost of the project (\$2,000 maximum) made payable to: DELRAY ESTUARY HOA, INC. Projects with a cost of less than \$1,500 do not require a damage deposit check.

**DRAWINGS AND PLANS**

Include a drawing shown on your property survey indicating proposed changes. Plans with dimensions must be included. Also include material specifications and colors and finishes.

**GUTTER APPLICATIONS**

- Include photos of you building with gutter and downspout locations drawn in.

**ADDITIONAL MATERIAL**

- Product brochures, specification sheets and photographs of proposed change.

**SEE PAGE 2 FOR INSTRUCTIONS AND ESTUARY RULES GOVERNING BUILDING/STRUCTURAL MODIFICATIONS**

