



DESIGN REVIEW APPLICATION

MODIFICATIONS REVIEW COMMITTEE APPLICATION

(PLANS MUST BE SUBMITTED NO LATER THAN THURSDAY)

Owner's Name: _____

Phone: _____

Property Address: _____

Date: _____

Email: _____

A review is hereby requested to make the following modification, alteration, or addition as described on attached pages.

Construction, installation, alterations, and colors shall be in strict accordance with the approved drawings and notes on the drawings. Approval of this request is contingent upon your acceptance of total responsibility for repair of all fences, walls, electrical and electronic lines or equipment and any external portion of your home damaged in the process or as a result of said alteration or maintenance and completion of the alteration or maintenance and all repair work, which may be necessary within the completion date shown below. Commencement of the alteration or maintenance work constitutes acceptance of these conditions.

GC/Builder: _____ Phone: _____

Emergency Contact: _____

Address: _____ License #: _____

Proposed Start Date: _____ Proposed Completion Date: _____

TWO (1) SET OF PLANS WHICH INCLUDE THOSE ITEMS LISTED ON THE ATTACHED CHECKLIST WHICH ARE APPLICABLE TO THE CONSTRUCTION/REMODELING BEING DONE ARE REQUIRED

Include such details as the dimensions, materials, color, design, location, and other pertinent data. Where appropriate plans should be signed and sealed by a state-registered architect, landscape architect or engineer, as applicable.

Allow thirty (30) days for a written response.

When applying for a project you are giving BBCA full access to the exterior of your property.

(KNOW WHATS BELOW CALL 811 BEFORE YOU DIG)

I HAVE READ THE ABOVE STATEMENT & UNDERSTAND MY RESPONSIBILITIES

Sign & Date: _____

MODIFICATIONS COLORS AND MATERIAL

(PAINT/ROOF SAMPLES MUST BE SUBMITTED)

<u>SURFACE</u> (Name, No, Mfg.)	<u>MATERIAL</u>	<u>COLOR</u>
Roof _____		
Fascia _____		
Soffit _____		
Exterior Painting _____		
HVAC Relocation/HVAC Line _____		
Generator _____		
Columns _____		
Walls _____		
Doors/ Windows _____		
Garage Door _____		
Driveway _____		
Shutters/Awnings _____		
Patio Enclosure _____		
Railings _____		
Flood Barriers _____		

MODIFICATIONS CHECKLIST

IMPROVEMENTS:

Survey/Site Plan	
Building	
Landscaping	
Grading/Drainage (marked on site plan)	
Swimming Pool	
Screen Enclosure	
Mailbox	

**SAMPLES OF COLOR & MATERIAL ARE
REQUIRED. SITE PLAN SHOWING EXACT
LOCATION & TYPE**

LANDSCAPING

Plan		
Street Tree		
Number of Trees		
Pool Spa/ Heater Buffer		
AC Buffer		
Lighting		
Fence (only temporary fencing is allowed for pool construction purposes)		
Other		

Please send your request to BBCA if you're in a Single-family home.

Multi-Family/Condo/Highrise must submit through their HOA for approval prior.

Marcello Amaral
MarcelloA@bbcahome.com

Marie Ludwig
MarieL@bbcahome.com

3451 Bonita Bay Blvd, Suite 200
Bonita Springs, FL. 34134

Ph: 239-495-8111 Fax: 239-495-8480

NEW CONSTRUCTION -- REVIEW FORM

GENERAL INFORMATION

DATE RECEIVED (*BBCA use only*)

Construction Address: _____ Builder _____
Block _____ Lot # _____ Field Contact _____
Subdivision _____ Mobile # of field contact _____
OWNER _____ Address _____
Mailing Address _____ City/State _____
Telephone _____ Fax _____
Architect _____ Landscape Architect _____
Address _____ City/State _____
Telephone _____

The following information must be submitted, including (1) copy of each plan:

Check if submitted at this time:

- Preliminary Stake Out
- Site Plan with Tree Survey
- Overlay & Existing grades
- Landscape Plans with existing
- Vegetation & Trees to be saved
- Preliminary Floor plans
- Preliminary Stake Out
- Site Plan with Tree Survey
- Living Area Sq. Ft:
- Wall section/ Stem Wall detail
- Elevations of finished grade/Footer of wall
- Finished Floor
- Proposed Elevations (All 4 required)
- Pool Enclosure finished grade
- Roof plan
- Living Area Sq. Ft:
- Overlay & Existing grades
- Wall section/ Stem Wall detail

EXTERIOR COLORS AND MATERIALS: (Optional currently)

Paint: Manufacturer & Number (Submit Color Chips)

Walls _____ Trim _____ Doors _____ Other _____

Chimney Cap _____ Railing _____ Shutters _____

Roofing: Manufacturer & Color (Submit Sample)

Driveway Material: Manufacturer, Color & Style (Submit Sample)

Screen Enclosure Colors: Structure _____ Screen _____ Submit catalog cuts on

exterior finishes, i.e., railings, medallions, etc.

Bonita Bay Community Association
3451 Bonita Bay Boulevard, Suite 200
Bonita Springs, FL 34134
239-495-8111 Fax: 239-495-8480

NEW CONSTRUCTION DEPOSIT FORM

Bonita Bay Community Association
3451 Bonita Bay Boulevard, Suite 200
Bonita Springs, FL. 34134
239-495-8111 Fax: 239-495-8480

OWNER: _____

Address: _____

Lot ____ Block ____ Community _____

GENERAL INFORMATION: _____

License No. _____ DEPOSITS: NEW CONSTRUCTION OR REBUILD.

Address _____ Construction Deposit (\$5,000) _____

City _____ Refundable _____

Telephone _____ REMODELING/Addition Deposit (\$1,500)

Refundable _____

Contact _____

AGREEMENT:

I, _____, as Builder for the above-described construction project, acknowledge and agree that the above-described deposit is being held by Bonita Bay Community Association in order to ensure that the improvements will be constructed in accordance with plans and specifications which have been approved.

I further acknowledge and agree that:

1. I have read and understand the Covenants and Restrictions applicable to the property and the Design Review Guidelines and will follow and obey the said Covenants, Restrictions and Guidelines.
2. I am responsible for completing the project as described by the drawings and specifications approved and any proposed changes will be submitted for approval prior to implementation.
3. I will always maintain a clean construction site and install a job sign, commercial dumpster, and job toilet in conformance with the Design Guidelines.
4. I am responsible for the conduct of all workers always performing services on this project while they are in Bonita Bay.
5. I will notify the office of Bonita Bay Community Association Design Review for field inspections.
6. I understand that the deposit will be returned after completion of the Final Review by Design Review with no interest added.
7. Any fees paid, or charges paid by BBCA for repair of damaged areas, the correction of changes not approved by BBCA Design Review Committee or work contracted to improve the appearance of untidy sites may be deducted from the Deposit.

THIS APPLICATION, Deposit and Agreement made this _____ day of _____, 20____

By _____

WITNESSES

GC/BUILDER'S SIGNATURE

Application approved this _____ day of _____, 20 ____ by _____.

**NEW CONSTRUCTION DEPOSIT RECEIPT
FOR BUILDING/LANDSCAPING**

I, _____ of _____
affirm that the construction deposit in the amount of \$5,000.00 was paid solely by
_____ the
construction company contracted to construct the on-Lot _____
Block _____ at
Bonita Bay and has not been paid or passed through to the owners of the lot.

I agree that such deposit, or any part thereof, may be used by Bonita Bay Community Association in satisfaction of violations of the Construction Standards by _____ as set out in the Design Review Guidelines. Upon completion of all construction covered by this deposit, Bonita Bay Community Association agrees to refund to the contractor the deposit less any amounts utilized for satisfaction of said violations.

As the deposit will be held in a non-interest-bearing account, I understand that it shall be returned after completion of the Final Inspection with no interest added.

Deposit received this _____ day of _____, 20 ____.

GC/Builder's Signature _____

Received this _____ day of _____, 20 ____.

Bonita Bay Community Association