



NORTHSTAR ESTATES

HOMEOWNERS ASSOCIATION OF DAVIE, INC.

February 28, 2008

Dear Homeowner:

Re: Improvements or Changes to Exterior of Residences

Homeowners wishing to make any improvements, including repainting, or changes to the exterior of their residence in *NORTHSTAR ESTATES* are required by Article VIII. of the HOA documents to submit the following for review by the Architectural Review Board –

1. Completed A.R.B. Application Form (copy enclosed);
2. Completed and Notarized Indemnity Letter (copy enclosed);
3. Copies of Contractor's license and insurances;
4. Copy of contract (amounts may be blacked out);
5. For painting work, samples of paint colors are to be submitted with 1. through 4. above
6. Complete Plans which will be used to obtain permit(s) showing work to be done and specifying materials to be used - except in certain cases such as landscaping, which can be submitted as a sketch on a survey which shows the location and specifications of plantings;

Final approval by the A.R.B. for work requiring permits is subject to receiving –

- a. Copy of Building Permit Application and Building Permit Card;
- b. Signed and Sealed As-Built Survey, by a registered surveyor, showing completed improvements

Yours truly,

The Board of Directors

ARCHITECTURAL REVIEW BOARD FORM

Homeowner Association: _____

Homeowner Name: _____ Lot/Block: _____

Address: _____ Phone: _____

Contractor Name: _____ License #: _____

Address: _____

DESCRIPTION OF ADDITION/REVISION: _____

MATERIALS TO BE USED:

TYPE:

COLOR:

Roof: _____

Ext. Walls: _____

Fascia: _____

Patio Screen: _____

Privacy Fence: _____

Driveway & Walk: _____

Pool Deck Finish: _____

Railing: _____

Other: _____

NAME AND PHONE NUMBER OF PARTY TO CONTACT AFTER REVIEW: _____

FOR OFFICE USE ONLY

DATE: _____ LOT/BLOCK: _____

The Architectural Drawings for Improvements on the above lot have been reviewed by the Architectural Control Board and have been:

_____ Approved

_____ Approved with Comments

_____ Denied

Comments: _____

X _____
Chairman/Committee Member

INDEMNITY LETTER

(Unit Owner Name)

Date: _____

To Whom It May Concern:

I, the undersigned, agree to indemnify and hold harmless _____
Association from any and all liability, defense costs, including attorney fees and all
other fees incidental to defense, loss or damage _____ Association
may suffer as a result of claims, demands, costs or judgments against it arising from
the following: _____

(Signature of Owner)

Street Address

(Print Name of Owner)

City, State, Zip

ACKNOWLEDGMENT

STATE OF FLORIDA,
COUNTY OF _____

Before me personally appeared _____ to me
well known and known to me to be the person described in and who executed
the foregoing instrument, and acknowledged to and before me that
_____ executed said instrument for the purposes
therein expressed.

NOTARY PUBLIC - STATE OF FLORIDA

MY COMMISSION EXPIRES