

Clubsde Neighborhood Condominium Associaiton

Architectural Modification Form

Date: _____

Unit Owner (applicant): _____

Address: _____ Three Iron Drive, Unit No . _____ E-mail Address _____

Out of town Address: _____ City _____ St. _____ Zip _____

Home Phone No. _____ Work Phone No. _____ Fax No. _____

SUBJECT BEING REQUESTED (Please describe in detail, include materials and colors used as well as size):

Please include the following supporting documentation:

- Name of Company Performing Work
- Proof of Certificate of Insurance
- Copy of the Occupational License
- Permits – Where Applicable

**** Any expense incurred due to City/County code(s) will be the responsibility of applicant.**

PLEASE ATTACH DRAWING AND /OR PLANS.

I/We hereby make application to the Board of Directors for the above-described item to be approved in writing by the Board of Directors. I/We understand that all requests must be in conformity with the Declaration of Condominium Documents, By-Laws, Incorporation, Rules & Regulations, and Florida Statute, and conform to Collier County Codes.

I understand that approval of this request must be granted before the job is started. I acknowledge that I could be required to have the item removed if it is installed without prior approval. I further acknowledge that this request is granted only AS PRESENTED to the Board of Directors and must be completed as presented. Any modification to this approved request may not be accepted without the prior approval of the Board.

Signature of Applicant



Date: _____

ALL CURRENT AND FUTURE OWNERS RESPONSIBLE FOR MAINTENANCE OF AND/OR ALL DAMAGE CAUSED BY OR AS A RESULT OF THIS MODIFICATION:

FOR THE BOARD OF DIRECTORS:

APPROVED: _____ **DISAPPROVED:** _____

Please return this form and direct all questions to: Dorrill Management Group, 5672 Strand Blvd. Suite #1, Naples, FL 34110. Telephone: (239) 594-5448