

East Lake Woodlands Woods Landing TH Unit 1 Assn Inc.
c/o Ameri-Tech Community Management, Inc.
24701 US Highway 19 N, Suite 102
Clearwater, FL 33763
Phone (727) 726-8000 Fax (727) 723-1101

ARCHITECTURAL APPLICATION

NAME: _____

ADDRESS: _____

PHONE #: _____

PROPOSED ALTERATION:

1. Describe the alteration to be considered.
2. Attach a copy of the construction drawings for the improvements. For improvements, which require a building permit, attach a copy of the construction documents as submitted to the Pinellas County Building Department.
3. Attach a survey or dimensioned site plan with the proposed construction location on lot.
4. Contractor must be licensed and insured.
5. All copies of permits must be submitted to the Association.

CONTRACTOR ENGAGED: _____

STARTING DATE: _____ TO BE FINISHED BY: _____

Please be advised that you have ninety (90) days to start the project from the approval date or the application will be voided. If this happens, a new application must be submitted for review and approval again by The Board of Directors.

This form is to be submitted along with the sketch and specifications agreed upon with the contractor and/or a listing of materials used. These will be copied. The original will be filed in the office with a copy returned to you. By submitting this Application, the applicant agrees that upon approval the alterations will be completed without variation, from the approved plans.

Note for those replacing windows: In the event of a casualty loss to your windows under the Association's insurance policy, the replacement cost will be for windows that satisfy the building code at the time of loss. Windows that satisfy the building code at the time of loss may be of lesser grade than those they are replacing.

Applicant Signature: _____ Date: _____

APPROVED: _____ **DISAPPROVED:** _____

DATE: _____ SIGNED BY: _____

TITLE: _____