Village on the Green 2 ARCHITECTURAL MODIFICATION REQUEST FORM

c/o Ameri-Tech Community Management, Inc. 24701 US Highway 19 N, Suite 102, Clearwater, FL 33763 Robert Kelly, LCAM rkelly@ameritechmail.com

Phone: (727) 726-8000 ext. 232 | Fax: (727) 723-1101

Hama/		do hereby request permission to make the following modification(s) to my unit #	
			E-mail:
DESCRI	PTION OF REQUEST:		
Attach	the following as applicable:		
•	Plot Plan with proposed modifica	tion(s) to approximate scale with dim	ensions.
•	 Complete description (photos/drawings) as to construction design, materials (types & sizes) and color/finish. 		
•	Floor Plan, Elevation, Section Dra		
	Copy of County Building Permit (in	• • • •	
	my signature, understand and agr		
1.	that obtaining insurance for the in		II modification(s) made in the area. I also acknowledge
2.			ner Association maintenance responsibility.
3.	* *		erty that may be caused by this modification(s).
4.			val or repair of the modification at my own expense if:
••	The state of the s		
	modification is not maintained in	a safe condition; or 3) the modificat	
	modification is not maintained in structures and is not satisfactory	a safe condition; or 3) the modificat to the Board of Directors.	ons submitted for approval with this form; or 2) the ion is not maintained in keeping with the surrounding
5.	modification is not maintained in structures and is not satisfactory I certify that I have read and agre	a safe condition; or 3) the modificat to the Board of Directors.	ion is not maintained in keeping with the surrounding
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5. Date Date Re APP	modification is not maintained in structures and is not satisfactory. I certify that I have read and agre applicable). cecived by Association ROVED BY Board of Directors OR	a safe condition; or 3) the modification the Board of Directors. See to follow the rules and regulations. Homeowner Signature(s) Signature APPROVED with Following Con Date Signature	tingencies by Board of Directors:

Date Signed

Board Signature

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