

Lakeside Preserve Home Owners' Association, Inc.

REQUEST FOR APPROVAL

This is a request form to be completed by the unit owner and submitted to the Board of Directors for approval **BEFORE** any work commences. Please complete in its entirety and drop off or mail to C&S Management, Inc., 4031 32 Street West, Suite A-20, Bradenton FL 34205, You may also email completed form to agamundi@cscmsi.com

THIS SECTION TO BE COMPLETED BY THE UNIT OWNER

DATE: _____

NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

EMAIL ADDRESS: _____

DESCRIBE THE CHANGE/ADDITIONS/INSTALLATION: (i.e. windows, screen door, Florida room, landscaping, etc.)

PAINTING: COLORS – HOUSE: _____ TRIM: _____ DOOR: _____

Include color samples/chips with application

LOCATION: (ATTACH A COPY OF THE PLOT PLAN/SURVEY SHOWING THE LOCATION OF THE MODIFICATION - **MUST BE PROVIDED**)

GIVE DESCRIPTION: _____

SPECIFICATIONS: (ATTACH A COPY OF THE PLANS OR SUITABLE DRAWING OR PICTURE - **MUST BE PROVIDED**)

DIMENSIONS: _____

MATERIAL (S): _____

ESTIMATED TIME OF COMPLETION: _____

NOTE: THE ASSOCIATION WILL NOT BE RESPONSIBLE FOR ANY DRAINAGE OR FLOODING ISSUES THAT MAY ARISE DUE TO IMPROPER CONSTRUCTION.

ALL REQUESTS MUST CONFORM TO THE LOCAL ZONING AND BUILDING REGULATIONS. OWNERS ARE RESPONSIBLE FOR OBTAINING THE NECESSARY PERMITS.

THIS SECTION TO BE COMPLETED BY THE MANAGEMENT CO. AND ACC

REQUEST: DATE APPROVED: _____ DATE DENIED: _____

AUTHORIZED SIGNATURE: _____

COMMENTS OR CONDITIONS: _____

DATE RECEIVED BY C&S: _____

Phone: 941-377-3419 Fax: 941-377-6218