

Lely Civic Association, Inc. Alteration & Modification Request

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:
[NOTE: This is a two page form. Both pages must be completed & submitted]

OWNER INFORMATION

Name(s)

Lely Address

Phone #

Cell #

Other Phone #

Email Address

Modification

- Exterior Appearance including painting
- Structural Changes including additions
- Landscaping
- Permits if needed
- Other

Application must be submitted minimum 14 days before start date.

EXPLANATION OF MODIFICATION

You must submit a drawing for any modification and/or vendor's brochure. The drawing should include a site plan and the scale should be 1/2 inch = 1 foot. Please list sizes and materials to be used.

CONTRACTOR INFORMATION

Name _____

Address _____

City _____ State _____ ZIP _____

Phone # _____ Fax # _____

DISCLAIMER AND SIGNATURE

1. Actual construction shall be performed by a fully insured licensed contractor. All applicable codes and regulations must be in compliance and all necessary permits will be obtained at my/our expense.
2. I/we have read all applicable sections of the Bylaws and I/we understand same.
3. All maintenance of this alteration/modification will be performed at my/our expense.
4. I/we understand that, should any legal regulatory agency require, at any time in the future, modifications to this variance, they will be done at my/our expense.
5. Any maintenance cost incurred by the Association, as a result of this variance, will be at my/our expense.
6. This alteration/modification is subject to all requirements of the Bylaws and other applicable regulations.
7. I/we understand that it is my/our responsibility to advise future assigns and of their responsibility for same.
8. All of the above information is truthful and accurate.

Signature _____ Date _____

Signature _____ Date _____

****NO WORK SHALL COMMENCE BEFORE RECEIVING BOARD APPROVAL****

Request Requirements

Please be aware that an incomplete request package will cause delays in processing. The following items must be included in order for Anchor Associates and the Board of Directors to proceed:

- _____ Completed Alteration & Modification Request form
- _____ Drawing and/or vendor brochure
- _____ Copy of contractor's license
- _____ Copy of contractor's insurance

Start Date: _____

Finish Date: _____

Return this request to:

Lely Civic Association, Inc
 c/o Anchor Associates, Inc.
 2340 Stanford Ct
 Naples, Florida 34112
 (239) 649-6357 phone
 (239) 649-7495 fax
 admin@anchormanagers.com



REQUEST APPROVAL

_____ Approved _____ Date _____

_____ Disapproved _____ By: _____

Board Officer or Director

Once the request is approved, no changes can be made in regards to materials, colors or scope of work without re-approval from the ARC.