

ALTERATION APPLICATION TURTLE CREEK I & II

Any Homeowner considering improvements to or alterations of the appearance of their real property must submit an "Alteration Application" to the Association. This request **MUST** be in writing and **MUST BE APPROVED IN WRITING PRIOR** to the commencement of work. Exterior modifications requiring prior approval include, but are not limited to exterior paint, roofs, pavers, and hurricane shutters. The Association reserves the right to require any homeowner to undo architectural changes made **WITHOUT PRIOR APPROVAL AND/OR IN VIOLATION OF THE DECLARATION OF COVENANTS AND CONDITIONS AND RESTRICTIONS**. The Association also reserves all rights under the law to enforce the Covenants, Conditions and Restrictions.

Mail to: **Ameri-Tech Property Management ~ 24701 US Highway 19 North ~ Suite 102 ~ Clearwater, FL 33763
727 / 726-8000**

Name: _____

Address: _____

Home Telephone: _____ Work Telephone: _____

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 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. If you are **painting**, please attach samples of all paint colors; with appropriate labels (e.g. body color, trim, etc.)

NOTE: All work is to be performed during the hours of 7am ~ 7pm, Mon. ~ Sat. ONLY. Signs are not permitted.

CONTRACTOR ENGAGED: _____

STARTING DATE: _____ TO BE COMPLETED BY: _____

This form is to be submitted along with the sketch and specifications agreed upon with the contractor and/or a listing of the 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.

Owner's Signature: _____ Date: _____

Owner's Signature: _____ Date: _____

For Association Use Only

APPROVED _____ DISAPPROVED _____

Date: _____ Signed By: _____

(Authorized Signature)

Title: _____

PLEASE BE ADVISED THAT THE ARCHITECTURAL CONTROL COMMITTEE HAS SIXTY (60) DAYS TO REVIEW AN APPLICATION – PLEASE SUBMIT IN AMPLE TIME PRIOR TO START DATE.