

# MAGNOLIA SQUARE CONDOMINIUM ASSOCIATION ARCHITECTURAL ALTERATION APPLICATION

PLEASE COMPLETE AND RETURN THIS FORM FOR APPROVAL PRIOR TO ANY COMMENCEMENT OF WORK

Submit Application and Attachments to: Ameri-Tech Community Management, Inc.  
24701 US Highway 19 North, Suite 102, Clearwater, FL 33763  
Attention: T.C. Sayles – [tcsayles@ameritechmail.com](mailto:tcsayles@ameritechmail.com)

Unit Owner's Name: \_\_\_\_\_ Application Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Installation: \_\_\_\_\_

Proposed Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Color (if applicable): \_\_\_\_\_ Dimensions: \_\_\_\_\_

Type of Materials: \_\_\_\_\_

Supplier/Contractor Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

- A sketch or plan of all improvements and photo must be attached to this application to show location and dimensions. Engineer's statement must be attached if required by Magnolia Square Rules and Regulations.
- Approval of any project by the Board does not waive the unit owner's sole responsibility to ensure the necessary County/City building permit(s) are obtained.
- It is the unit owner's sole responsibility to ensure that the contractor is properly licensed, bonded and has proof of worker's compensation and liability insurance.

Unit owner agrees to assume full responsibility and cost for any addition or change and for its future upkeep, maintenance, and replacement of the alteration. Any damages caused whatsoever by the installation, repair, maintenance, or removal of the alteration is the sole responsibility of the unit owner and any subsequent owner of the unit. This application must be provided to all subsequent owners of the unit.

Unit Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Unit Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FOR BOARD USE ONLY

For the Board of Directors: Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Comments: \_\_\_\_\_

Board Signature: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_