

**PLEASE KEEP FOR YOUR RECORDS
ALTERATION'S APPLICATION**

PORT BELLEAIR NO. 2 INC.

If you plan to make a major Alteration/Renovation to the interior/exterior of your unit, an Alteration Application must be completed and approved prior to beginning the actual work.

DATE: _____

NAME: _____ **UNIT NO:** _____

PROPOSED ALTERATION/RENOVATION: _____

CONTRACTOR: _____

CONTRACTOR LICENSE NO: _____ **PHONE NO:** _____

**Licensed contractor must provide a current Certification of Worker's compensation, and
Liability Insurance
Contractor/Company Vehicles Should Display Company Signage**

**Permits are required for major plumbing, electrical and window/patio replacements. County/City
permits are the responsibility of the Condo Owner
and must be posted conspicuously.**

BOARD OF DIRECTORS:

APPROVED: _____ **Alteration Application has been Approved. This Approval is good for sixty (60) days from the date of issue. Working Days/Hours: Monday – Saturday 8:00AM – 6:00 PM. Should Alteration not commence within sixty (60) days, a new request must be submitted to the Board of Directors for reconsideration.**

DENIED: _____ **Alteration Application has been Denied for the following reason:**

PRINT NAME: _____ **DATE:** _____

AUTHORIZED SIGNATURE: _____

RETURN COMPLETED FORM TO ANY BOARD MEMBER BEFORE WORK BEGINS:

Do not begin Work until you have Approval. If the work is done without Approval, you could be required to remove/restore the Alteration to its original state at the Homeowner's Expense.