

CAPRI WEST CONDOMINIUM ASSOCIATION, INC.
ARCHITECTURAL REVIEW FORM
APPLICATION FOR ALTERATIONS

INSTRUCTIONS

1. Complete entire Form.
2. Submit copies of any drawings or blueprints to be approved by the Board of Directors.
3. Work shall **NOT** commence until application is approved.
4. Approved applications shall **NOT** be altered.
5. Denied applications can be appealed to the Board of Directors.
6. Contractors employed must provide Certificate of Liability insurance.
7. Work effecting existing roofs requires written approval.
8. Sign & return to:

Argus Management of Venice, Inc.
1062 E. Venice Avenue
Venice, FL 34285

We _____, the owners of Unit # _____ at address _____
_____, hereby request approval to make the following
changes or alterations to our unit.

Drawing attached: **(yes / no)?**
Roof change: **(yes / no)?**

By this request, we as owners assume full responsibility for conformity, installation, maintenance, replacement and costs of the above work. We further agree to indemnify and hold harmless the Capri West Condominium Association, Inc. for any claims arising out of this action.

SIGNATURE: _____

DATE: _____

APPROVED

DENIED; REASONS:

BOARD OF DIRECTORS: BY _____

DATE: _____