

BAHIA VISTA GULF OF VENICE ASSOCIATION, INC.
ARCHITECTURAL REVIEW COMMITTEE
APPLICATION FOR ALTERATIONS

INSTRUCTIONS

1. COMPLETE ENTIRE FORM AND **ATTACH ALL APPLICABLE DOCUMENTS.**
2. SUBMIT COPIES OF ANY DRAWINGS OR BLUEPRINTS TO BE APPROVED BY THE ARC.
3. WORK SHALL **NOT** COMMENCE UNTIL APPLICATION IS APPROVED AND PERMIT(S) ARE ACQUIRED IF REQUIRED. LICENSED PLUMBERS AND ELECTRICIANS MUST BE UTILIZED.
4. APPROVED APPLICATIONS SHALL **NOT** BE ALTERED.
5. CONTRACTORS EMPLOYED **MUST PROVIDE CERTIFICATE OF LIABILITY INSURANCE, AND CURRENT LICENSE. PLEASE ATTACH.**
6. WORK EFFECTING EXISTING ROOFS REQUIRES WORK TO BE COMPLETED BY A LICENSED ROOFING CONTRACTOR.
7. NEW FLOORING FOR 2ND FLOOR UNITS MUST HAVE ADEQUATE SOUND BARRIER.
8. **SUPPLY MANUFACTURERS SPECIFICATIONS FOR NEW FLOORING SOUND INSULATION, WINDOWS, AND DOORS** WHICH MUST MEET BUILDING CODE.
9. DENIED APPLICATIONS CAN BE APPEALED TO THE BOARD OF DIRECTORS.

RETURN TO: **ARGUS MANAGEMENT OF VENICE, INC.**
 1062 VENICE AVENUE EAST, VENICE, FL 34285

I/WE _____, THE OWNER(S) OF UNIT # _____ AT ADDRESS
_____, PHONE #S: _____

EMAIL: _____, HEREBY REQUEST APPROVAL TO MAKE THE
CONTRACTOR _____

CONTRACTOR'S PHONE# _____, EMAIL _____

PROPOSED CHANGES OR ALTERATIONS TO MY/OUR UNIT. _____

DRAWING ATTACHED: (YES / NO)?

ROOF CHANGE: (YES / NO)?

BY THIS REQUEST, WE AS OWNERS ASSUME FULL RESPONSIBILITY FOR CONFORMITY, PERMITTING, INSTALLATION, MAINTENANCE, REPLACEMENT AND COSTS OF THE ABOVE WORK. WE FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS BAHIA VISTA GULF OF VENICE ASSOCIATION, INC. FOR ANY CLAIMS ARISING OUT OF THIS ACTION.

SIGNATURE: _____ DATE: _____

*****ARCHITECTURAL REVIEW COMMITTEE*****

____ APPROVED ____ DENIED. REASONS: _____

SIGNATURE: _____ DATE: _____