FOREST PARK CONDOMINIUM ASSOCIATION, Inc. Of Dunedin

Request for Renovations and/or Architectural Changes

The attached form is for your use on any renovations/alterations that you are planning at your unit in Forest Park Condominium Association, Inc., of Dunedin (Association). Please complete and return this form as indicated.

If you are doing inside renovations the Association Board of Directors (Board) would like to know what changes / improvements you are considering so that the Association can ensure our Documents, Statutes, building codes and acceptable standards are met.

To any owner considering the installation of wood/tile floor in a 2nd floor unit please be considerate of your downstairs' neighbors and make sure that a sufficient sound proof barrier is put down before the installation of the actual flooring.

If you are considering replacing any outside door(s), windows, or planning on enclosing any portion of your unit please attach all necessary drawings, plans, etc.

The association will need a request for the installation of Ring or any recording door bells.

Unless additional information is required, the Board will respond within fourteen (14) days either approving or disapproving the proposed work.

If you have any questions please call the Association's management company, Ameri-Tech Companies, at their Clearwater Office number listed on the form and ask to speak with the Forest Park Property Manager, Chris Stancil.

Thank you for your cooperation,

The Board of Directors

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FOREST PARK CONDOMINIUM ASSOCIATION, Inc. Of Dunedin

Request for Renovations and/or Architectural Changes

	Request From:		Date:		
	FP Local Address:		Primary Phone:		
	Alternate Address:		Alternate Phone:		
		DOCUMENT CHECKLIST (To be submitted at time of request	.)		
	☐ Permit ☐ S	pecification \square Building Plan \square Details	☐ Vendor Info	Photos	
Brie	f Description of Altera	tion, Improvement, Addition, etc.:			
-					
	tractor Name: ress:		Phone:		
	ificate of Insurance:			<u> </u>	
Occi	upational License Num				
		HOMEOWNERS AFFIDAVIT			
ASS APP CON	OCIATION, INC. AND A PROVAL OF THE BOAR NFINED TO 8:00AM - 5:	JMENTS, RULES & REGULATIONS AND POLICE AGREE TO ABIDE BY THE SAME. NO WORK WIL D OF DIRECTORS. CONTRACTORS AND/OR RE 00PM MONDAY THROUGH FRIDAY AND ALL MAT NTO THE DUMPSTERS ON PROPERTY.	L COMMENCE WITH NOVATION WORK	HOUT THE WRITTEN HOURS SHOULD BE	
Sig	ned:		Date		
		Please mail, email, or fax your completed requestion Ameri-Tech Companies, Inc. ATTN: Angela Johnson, LCAM 24701 US Hwy 19 North, Suite 102 Clearwater, FL 33763 Phone: (727) 726-8000, Toll Free: (877) 72 Fax: (727) 723-1101			
		DO NOT SUBMIT FORM TO ANY BOARD M	EMBER!!		
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