

**Point Seaside Residents
Association, Inc.**
Request for Exterior Addition or Modification

Request From: _____ Date: _____
Local Address: _____ Phone: _____
Post Office Box: _____ Phone: _____
Email Address: _____

- - - DOCUMENT CHECKLIST - - -
(To be submitted at time of request)

Permit Specifications Building Plans
 Details Vendor Information Photos

Brief Description of alteration, improvement, addition, etc.

Contractor: _____

Address: _____

Certificate of Insurance: _____

Occupational License #: _____

- - - HOMEOWNER'S AFFIDAVIT - - -

I have read the Deed Restrictions and Policies of Point Seaside Residents Association, Inc., and agree to abide by same. No work will commence without the written approval of the Architectural Review Board/Board of Directors.

Signed: _____ **Date:** _____

.....
BOARD OF DIRECTORS RECOMMENDATION

Approved Denied **Date:** _____

Signature: _____ **Print Name:** _____

Signature: _____ **Print Name:** _____

Signature: _____ **Print Name:** _____

.....
FOR THE BOARD OF DIRECTORS:

Signature: _____ **Print Name:** _____

PLEASE MAIL YOUR REQUEST TO:

Point Seaside Resident's Association, Inc.
C/O MONARCH ASSOCIATION MANAGEMENT, INC.
500 Alternate 19 South - Palm Harbor, FL 34683
(727) 204-4766 – cindy@monarcham.com

Received: _____
To ARB: _____
Approved: _____
Denied: _____
Final Approval: _____