Pura Vida Residence Condominium Association, Inc Alteration Application

	Address:		
	Phone Number:	Email:	
Propo	sed Alteration:		
1.	Describe the alteration	to be considered.	
2.		nstruction drawings for the improvements. For improvements which require a buildi	
		f the construction documents as submitted to the County Buildi	ng
,	Department.		
3. 1	Contractor must be lic	ensioned site plan with the proposed construction location on lot.	
1. 5.		ust be submitted to the Association.	
5. 6.	•	eation and Supporting Documentation to:	
		to Frankly Coastal Property Management, LLC at: info@franklycoastal.com	
		pastal Property Management, LLC, PO Box 1294, Tarpon Springs, FL 34688	
7.	If you have any questi	ons please call: 727-799-0031	
			
20NIT			
CONT	RACTOR ENGAGED:_		
STAR	TING DATE:	TO BE FINISHED BY:	
	111 10 <i>B</i> 7 (12.		
			6.11
		ong with the sketch and specifications agreed upon with the contractor and/or a listing sopied. The original will be filed in the office with a copy returned to you. By submit	
		es that upon approval the alterations will be completed, without variation, from the a	
olans.		is that upon approval the alterations will be completed, without variation, from the a	pproved
	Applicant Signature:_	Date:	
	APPROVED	DISAPPROVED	
		-	
	Date:	_ Signed By:(Authorized Signature)	
		(Addionizod dignaturo)	
		Title:	