<u>ALTERATIONS AND ADDITIONS APPLICATION</u>

San Tropai Building 2 Condominium

HOMEOWNER:	DATE:
ADDRESS:	UNIT
	NT:
LOCATION:	
	COMPLETION DATE
MATERIAL TO BE USED:	
	ON (IF APPLICABLE):
HOW/WHERE WILL OLD ITEMS	S BE REMOVED FROM THE PREMISES:
	be attached to the application to show location and dimension
As of the approval date of this alteramintain it in a safe and presentable	ation, I accept full responsibility for the altered area and will e condition.
rules in this agreement. I also under forth by the Association, I am subject alteration will not be completed by before 8:00 a.m. and end by 6:00 p. with the Rules and Regulations, I we	e homeowner, I am acknowledging that I will abide by the erstand that if I fail to comply with the rules of the policy set ect to a fine. I agree to contact the Board of Directors if the the stated date of this application. I agree not to begin work m., Monday-Saturday and no work on Sunday. In accordance will notify my neighbors of said work. I am aware I may not ean up and/or vacuum any mess that is made in front of my
HOMEOWNER'S SIGNATURE:	DATE:

ALTERATIONS AND ADDITIONS APPLICATION (Cont'd)

San Tropai Building 2 Condominium

DATE RECEIVED:	BY:	
DATE APPROVED:	BY:	
DATE REJECTED:	BY:	
REASON FOR REJECTION:		