

East Lake Woodlands Condo 5

Architectural Review Committee (ARC) Unit Alteration Approval Form

Today's Date: _____ Unit Address: _____

Unit Owner Printed Name: _____

Your Contractor's Name & Company: _____

The above-named contractor will begin work in my unit starting on **(date)** _____

I/we:

- Have given 30-days notice unless the work is deemed an emergency.
- Have checked the appropriate boxes below to indicate the type of work to be performed and will follow the required specifications or standards found on www.elwcondo5.org for the specific items identified below.
- Understand that we (Unit Owner/Contractor/Service Representative) must comply with all the required provisions in the Amended Declaration and General Rules & Regulations of **East Lake Woodland Condo 5 "ELW Condo 5"**.
- Understand that, as the unit owner, I am responsible and liable for any damage to the condominium property caused intentionally or negligently.
- Contractors have and can provide a Certificate of Insurance.
- Affirm that this work will not adversely affect the safety of residents or the structural integrity of the common elements or any portion of the condominium property.
- Will hold harmless **ELW Condo 5**, its Board Members, Unit Owners, and property management from any liability incurred. Unauthorized additions, modifications, or alterations are subject to removal, and the condominium property must be restored to its original condition and appearance at the unit owner's expense.
- Understand that I am responsible for ensuring all necessary permits are acquired and that all building codes are complied with before any work begins.
- Understand that I am responsible for ensuring the contractor cleans all common areas at the conclusion of work each day and disposes of waste as per Rules & Regulations.

Indoor Air Handler Replacement			
Air Condenser/Conditioner Replacement		Window Replacement	
Bath or Kitchen Remodel		Exterior Door Replacement	
Electrical Wiring Upgrade		Other (Describe):	
Flooring Replacement			
Hot Water Heater Replacement			
Lanai Enclosure			

I have read and understand the above and will include all applicable drawings and/or specifications.

Unit Owner Signature: _____ Date: _____

In Absentia Representative Name*: _____ Unit: _____

In Absentia Representative Signature*: _____ Date: _____

*The In Absentia Representative has agreed to assume full responsibility for the contractor during the Unit Owner's absence

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Architectural Review Committee (ARC) Unit Alteration Approval Form

Board Member Name: _____ **Position:** _____

Board Member Signature: _____ **Date:** _____

Board Member Name: _____ **Position:** _____

Board Member Signature: _____ **Date:** _____