

# Gardens of Forest Lakes Condo Assn.

## Architectural Control Committee

### Form for Modifications or Additions to Existing Premises

Please send to: Ameri-Tech Community  
Management, Inc  
6415 1<sup>st</sup> Ave S,  
St. Petersburg, FL.  
33707

**OR**

Magda Hatka's Email:  
mhatka@ameritechmail.com  
Office: 727-726-8000 Ext 500  
Fax: 727-723-1101

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ Lot # \_\_\_\_\_ Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

Modification or Addition Requested: \_\_\_\_\_

Brief description of what you intend to do/have done:

\_\_\_\_\_  
\_\_\_\_\_

Contractor (or yourself): \_\_\_\_\_

Checklist:

\_\_\_\_\_ Have you provided a sketch or diagram, preferably with lot survey?

\_\_\_\_\_ Have you notified immediate neighbors and received their approval?

\_\_\_\_\_ Have you provided the business license and proof of insurance for contractor?

\_\_\_\_\_ Is there a similar change completed on another home in Gardens of Forest Lakes HOA? If so: Name:

\_\_\_\_\_  
Address: \_\_\_\_\_

Please note below any other comments which you feel would be helpful to the Architectural Control Committee in evaluating your request:

\_\_\_\_\_  
\_\_\_\_\_

Homeowner Signature: \_\_\_\_\_

**Do not write below this line - For official use only**

Architectural Committee Decision: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Conditional Approval

Conditions: \_\_\_\_\_

ACC Signature: \_\_\_\_\_