

SERAFINA AT TIBURON HOA

Seacrest Southwest

1044 Castello Dr, Suite #206, Naples FL 34103

(239) 261-3440

Name of Owner(s): _____

Address: _____

Date: _____ Day Phone: _____ Evening Phone: _____

Approval is hereby requested for the following modification(s), addition(s), and/or alterations as described below and on attached pages. (Circle applicable work and / or describe below):

Exterior Doors	Lanai (Extension)	Screen/Enclosure
Driveway	Solar Collectors	Exterior Painting (must submit paint addendum)
Wall/Fence	Hurricane Shutters	Roof Repair *
Landscaping	Satellite 18"/Antenna	Other (list below)

* Must specify (via initials) one of the following approved **Replacement Roof Tiles**

_____ Boral US Clay in the "S" configuration with a color blend of 50% Red and 50% El Camino Blend

_____ Ludowici Clay Tiles in the "S" configuration with a color blend of 85% Santiago Rose and 15% Vechio

THIS IS A RE-SUBMITTAL (Circle) YES NO

Additional Information: _____

This section must be completed:

_____ This work will be performed by a Florida State Licensed contractor. Provide a copy of license & proof of insurance.

_____ This work will be performed by a homeowner. (Read and initial the statement below)

_____ The applicant homeowner holds the association and its managing agent harmless by initiating the improvement work ourselves.

Specifications of modification (i.e. size, color, type of material) & a plot diagram or site plan are required. Other documentation may be required. Please check the appropriate items, as attached, below:

___ Initial Plans and/or Specifications

___ Revised Plans and/or Specifications

___ Tree Survey

___ Lot Survey

___ Materials Designation Plan / Samples

___ Plans Sealed and Signed by a Professional

___ Plans Signed by Owner

___ Proposed Improvement Contract

Property _____

Date Application Received _____ Date Reviewed by Property Manager _____

DRC Recommendation to Board of Directors:

_____ Approve as Submitted

_____ Approve Subject to Conditions

Conditions: _____

_____ Disapprove

Reasons for Disapprove Recommendation:

Chair – Design Review Committee

BOARD OF DIRECTORS USE ONLY

Date Application Received _____ Date of Approval/Disapproval _____

_____ Approved

_____ Approved Subject to Conditions

_____ Disapproved

Conditions / Explanation of Disapproval:

Note: Any approval is subject to the following: 1. You are responsible for obtaining all required permits from the appropriate Collier County Building, Fire, and Zoning Departments. 2. Access to areas of construction is allowed only through your property; you are responsible for any damage to the Common Areas during construction.

Signature of Property Manager:

Date:
