

**ARCHITECTURAL REVIEW COMMITTEE (ARC)
REQUEST FOR MODIFICATION FORM
Ashton Place Homeowners Association (APHOA)
Resort Management
2685 Horseshoe Drive, Suite 215, Naples, FL 34104
Phone – 239-649-5526 FAX – 239-403-1061
Email – DBlouis@resortgroupinc.com**

Date Of Request: 3/27/25

I (We) MICHELE K LINDSTROM hereby request approval by the ARC for the
modification(s) shown below to the Unit/Lot # _____ address: 7837 ASHTON RD

Address of Applicant (if different): _____

Phone Numbers: (612) 991-5171 eric@lloonline.com
(work) (home)

DESCRIPTION OF ADDITION, CHANGE OR MODIFICATION

Submit one (1) copy of this form for all proposed additions, changes, modifications, etc... accompanied where appropriate by floor plans, exterior elevations (all views), and site plans (showing applicable setbacks, dimensions from property lines to proposed structures, etc...). In addition, submissions will include proposed colors, patterns, materials, name of company performing work as well as their Certificate of Insurance (including liability and workers' compensation), permit, if applicable, copy of Occupational license and all additional information necessary for the ARC and the Collier County Building Department (when involved) to make an informed decision. Any modifications to the property landscaping also requires this form.

Note that any expense incurred due to city/county/state or federal code changes will be the responsibility of the Applicant.

DESCRIPTION: Installing 3 brown colored Storm Catcher Rolldown Max Motorized on bronze colored structure

The undersigned acknowledges that they have read and understand this application. I (We) also understand that until a signed approval is received from the ARC and Ashton Place Homeowners Association Board, the job cannot be started. I (We) also acknowledge that we could be forced to have any work or item removed if it is done prior to approval. Furthermore, I (We) also acknowledge that this request, if approved, is granted AS PRESENTED to the ARC and must be completed as presented incorporating any required changes (if any) by the ARC and/or the Ashton Place Homeowners Association Board. I (We) also understand that the ARC and Board have up to 30 days to approve this request. Also, if the ARC requests any additional material, the time for approval will reset to when the additional material is submitted to the ARC.



Applicant's Signature _____

Applicant's Signature _____

Please return this form and all information to the address at the top of the form, Attention ARC.

The above Request For Modification to Unit/Lot # _____ has been:

☐ APPROVED ☐ APPROVED WITH CHANGES OUTLINED IN ATTACHED LETTER

☐ DISAPPROVED DUE TO REASONS OUTLINED IN ATTACHED LETTER

Date

ARC Chairperson

APHOA Board Member



Order ID: 47051 | Project Name: Vendo

6182 Idlewild St. Fort Myers, FL 339966
Phone: (239) 938-1000

Dealer Information

Client: Eric Lindstrom
Dealer: Eric Lindstrom
Email: eric@lloonline.com
Phone: (612) 991-5171
Terms:
Shipping Address: 7837 Ashton Rd
Naples, FL, 34113

Order Information

Order ID: 47051
Date Created: March 10, 2025
Project Name: Vendo
Sales Rep: Jeremy Dehner
Permit Pulled By:
HOA:
Product Counts:
Screens: 3
Shutters: 0
Windows: 0
Doors: 0

Description	Qty
Rolldown Storm Catcher Screen Opening Number = 8 Buck Width (inches) = 134 Buck Height (inches) = 148 Screen Type = Storm Catcher Manual or Motorized System = Motorized Motor Override = Yes Mount Location = Inside Hood Location = As High as Possible Number of Panels = Single Rolldown Hood Coverage (Multiple Openings) = One Opening Screen Color = Brown Luff Tape Color = Brown Track Color = Bronze Rolldown Hood Color = Bronze Bottom Bar Color = Bronze Installation Floor = Ground Does This Require Electrical Work? = No Left Structure Out = None Right Structure Out = None Top Structure = None Bottom Structure = None Left Structure In = Tier 2 Right Structure In = None	1



Rolldown Screen

6182 Idlewild St. Fort Myers, FL 339966
Phone: (239) 938-1000

Description	Qty
Rolldown Storm Catcher Screen Opening Number = 9 Buck Width (inches) = 134 Buck Height (inches) = 148 Screen Type = Storm Catcher Manual or Motorized System = Motorized Motor Override = Yes Mount Location = Inside Hood Location = As High as Possible Number of Panels = Single Rolldown Hood Coverage (Multiple Openings) = One Opening Screen Color = Brown Luff Tape Color = Brown Track Color = Bronze Rolldown Hood Color = Bronze Bottom Bar Color = Bronze Installation Floor = Ground Does This Require Electrical Work? = No Left Structure Out = None Right Structure Out = None Top Structure = None Bottom Structure = None Left Structure In = None Right Structure In = None	1



Rolldown Screen

Description	Qty
Rolldown Storm Catcher Screen Opening Number = 10 Buck Width (inches) = 115 Buck Height (inches) = 148 Screen Type = Storm Catcher Manual or Motorized System = Motorized Motor Override = Yes Mount Location = Outside Hood Location = As High as Possible Number of Panels = Single Rolldown Hood Coverage (Multiple Openings) = One Opening Screen Color = Brown Luff Tape Color = Brown Track Color = Bronze Rolldown Hood Color = Bronze Bottom Bar Color = Bronze Installation Floor = Ground Does This Require Electrical Work? = No Left Structure Out = None Right Structure Out = None Top Structure = None Bottom Structure = None Left Structure In = None Right Structure In = None	1



Rolldown Screen

134 x 148 Storm
catcher roll down

134 x 148 Storm
catcher roll down

8

9

10

115 x 148 Storm catcher roll down

lanai

MICHELE K LINDSTROM TRUST

7837 ASHTON RD Naples, FL
34113

egress



9



10



Storm Catcher "Curtain" Colors (above)

White

Gray

Black

Bone

Brown

White

Bronze

Ivory

Beige

Structure/Shutter Colors (below)







CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/13/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION** IS **WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Hub International Midwest Limited 1411 Opus Place Suite 450 Downers Grove IL 60515	CONTACT NAME: CSU Construction PHONE (A/C, No, Ext): 630-648-5600 E-MAIL ADDRESS: CSUConstruction@hubinternational.com	FAX (A/C, No): 630-468-5696
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : Certain Underwriters at Lloyds		
INSURER B : Accelerant Specialty Insurance Company		16890
INSURER C : Federal Insurance Company		20281
INSURER D :		
INSURER E :		
INSURER F :		

COVERAGES**CERTIFICATE NUMBER:** 1449078414**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PRO-JECT ☐ LOC OTHER:			DCS000065600	3/14/2025	3/14/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
C	AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			54326860	3/14/2025	3/14/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$			XS1174324	3/14/2025	3/14/2026	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N ☒ N	N / A	54326861	3/14/2025	3/14/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Manufacturing and Installation of Home Improvement Products. License # CRC056857 and # CGC1519801 | Insured Companies: The Smart Companies, Inc., Storm Smart Building Systems, LLC.
Proof of Insurance

CERTIFICATE HOLDER**CANCELLATION**

Storm Smart Sales
6182 Idlewild Street
Fort Myers FL 33966

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

RIST, BRIAN

STORM SMART BUILDING SYSTEMS LLC
5237 SUMMERLIN COMMONS BLVD STE 331
FORT MYERS FL 33907

LICENSE NUMBER: CGC1519801

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at [MyFloridaLicense.com](https://myfloridalicense.com)

ISSUED: 06/25/2024

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