



**Tropical Isles Co-Op, Inc.**  
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Fort Pierce, FL 34982  
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## CHANGES TO HOME ~ APPROVAL REQUEST

Date: \_\_\_\_\_ Landscaping Or Exterior Change \_\_\_\_\_

Name: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_ Lot #: \_\_\_\_\_

Project Description: \_\_\_\_\_

Person/Company completing the work: \_\_\_\_\_

Drawing attached for approval: \_\_\_\_\_

*(Note: If there are any changes to your submitted drawing, they will be noted below.)*

1. ALL ADDITIONS MUST BE ATTACHED TO THE HOME AND MUST MEET PARK SPECIFICATIONS.
2. THE PARK OFFICE MUST APPROVE ALL ADDITIONS IN ADVANCE.
3. ALL VENDORS AND CONTRACTORS MUST BE LICENSED BY THE STATE AND COUNTY AND MUST SHOW EVIDENCE OF INSURANCE.
4. ALL ADDITIONS MUST COMPLY WITH LOCAL ORDINANCES AND BUILDING CODES.
5. ANY EXTERIOR COVER ON PATIOS MUST MATCH THE SIDING ON THE HOUSE.
6. All additions or modifications approved by the Cooperative must be completed within three (3) months of the approval date. If work is not completed by this deadline, the Exterior Change to Home Approval Request will expire and require the resident to submit a new request for the Cooperative's consideration.

### **RECOMMENDED: PURSUANT TO LOCAL ORDINANCES AND CODES**

Resident Signature: \_\_\_\_\_ Date: \_\_\_\_\_

ARB Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Building and Grounds \_\_\_\_\_ Date: \_\_\_\_\_

Building and Grounds \_\_\_\_\_ Date: \_\_\_\_\_

#### **FOR OFFICE USE ONLY:**

☐ APPROVED ☐ NOT APPROVED

#### **NOTED EXCEPTIONS:**

THE FOLLOWING CHANGES MUST BE MADE PRIOR TO COMMENCEMENT OF ANY WORK:

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

Board Signature: \_\_\_\_\_ Board Signature: \_\_\_\_\_

Board Signature: \_\_\_\_\_ Board Signature: \_\_\_\_\_