

# CASA DI AMICI CONDOMINIUM ASSOCIATION, INC.

*A Corporation Not-for-Profit*

c/o Sunstate Association Management Group

PO Box 18809 Sarasota, FL 34276

Phone: 941-870-4920 Email: michelle@sunstatemanagement.com

## CASA DI AMICI CONDOMINIUM ASSOCIATION, INC. UNIT ALTERATION FORM

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### INSTRUCTIONS

1. Complete entire Form.
2. Submit copies of any drawings or blueprints to be approved by the Board.
3. Work shall **NOT** commence until application is approved.
4. Approved applications shall **NOT** be altered.
5. Denied applications can be appealed to the Board of Directors.
6. Contractors employed must provide Certificate of Liability insurance.
7. Contractors employed must provide Certificate of Workman's Compensation.
8. Sign and return to:

**Sunstate Association Management Group  
PO Box 18809 Sarasota, FL 34276**

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We \_\_\_\_\_ the owners of Unit # \_\_\_\_\_ at address  
\_\_\_\_\_ hereby request approval to make the following  
changes or alterations to our unit.

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Drawing attached: (yes/no)?

By this request, we as owners assume full responsibility for conformity, installation, maintenance, replacement and costs of the above work. We further agree to indemnify and hold harmless the Casa Di Amici Condominium Association, Inc. for any claims arising out of this action.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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\_\_\_\_\_ **APPROVED**  
\_\_\_\_\_ **DENIED; REASONS:**

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**BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_