



LOT ID# _____

MILANO RECREATION ASSOCIATION ARCHITECTURAL & AESTHETIC ALTERATION APPLICATION

Homeowner: _____
Address / Unit #: _____
Phone: _____ Email: _____

Before submitting any request, please review your neighborhood association documents for current restrictions and guidelines for Architectural & Landscape Modification review and approval process. Notification of approval or non-approval will be provided with 14 days of application receipt.

Describe the nature of your alteration:

Please include the following documents in your submission:

- Name of company performing work
- Certificate of Insurance
- Copy of Occupational License
- County Permits
- Drawings, plans, blueprints, pictures, color or material samples

Mail/E-Mail/Fax this application & materials to: Frankly Coastal Property Management
4985 Tamiami Trail East, FL 34113 • 239-774-7088 • 239-774-1512 FAX • ctickel@franklycoastal.com

I (we) hereby make application to the Architectural Review / Board of Directors for the Milano Recreation Association for the alteration described above. I/we understand that written approval of this request is in compliance with Association Declaration of Covenants and must be approved in-writing by the Board of Directors prior to work commencement. I/we also acknowledge that we could be responsible for removal of the alteration items if installed without the written approval of the Association or is deemed by the Board of Directors to be not in compliance with the Architectural & Aesthetic Control Standards of the Association Documents. I/we further acknowledge that any contractor damage done to Association common property or other homeowner property is my responsibility.

(Signature of Applicant) (Date) (Signature of Co-Applicant) (Date)

Board of Directors' Decision:	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED	<input type="checkbox"/> OTHER
Comments:	_____		

Authorized Director Signature:	_____		Date: _____