



2951 Clark Road  
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## ASSOCIATION #\_\_ REQUEST FOR APPROVAL WINDOWS / SLIDING GLASS DOOR REPLACEMENT

Owner(s) Name: \_\_\_\_\_

Date: \_\_\_\_\_

Unit Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Ashton Lakes Association #\_\_ approval request to have new windows and sliding glass lanai door installed in my unit at above designated unit address in Building #\_\_ in Ashton Lakes.

The work is being done by (company name and address): \_\_\_\_\_  
a licensed and insured contractor in Florida. A copy of their insurance certificate must be provided to Ashton Lakes.

All replacement windows and sliding glass doors must meet or exceed all current Florida and Sarasota County Building Code, including the most recent Miami-Dade code requirements.

Replacement windows and sliding glass doors must conform to the existing ones being replaced in color, size, and style, and conform to the rest of the building.

The contractor is responsible to remove all debris from the property, keep the work area safe, and secure any necessary permits or approval from the city or county.

I acknowledge that the work performed by the contractor / vendor and their personnel within my unit shall be at the undersigned's sole risk and responsibility, and the Association, its representatives or employees shall not have any responsibilities or liability for the work being performed, or for any damages or losses, including expenses resulting from contractor or vendor entry to owner's unit, damages incurred to common property, or personal injury.

By signing this form, I acknowledge receipt of this form and understand and agree to all of its terms.

Unit Owner Signature: \_\_\_\_\_

Association Approval Granted: \_\_\_\_\_ Date: \_\_\_\_\_

Association Approval Denied: \_\_\_\_\_ Explanation: \_\_\_\_\_

Association #\_\_ Officer: \_\_\_\_\_ Title: \_\_\_\_\_