STONEHEDGE ON THE HILL

A RESIDENT OWNED COMMUNITY (727)934-7917 Fax (727)942-4976

Request to Make Additions or Changes Form

THIS CHANGE FORM AND ANY ACCOMPANYING PAPERWORK MUST BE TURNED IN NO LESS THAN 2 WEEKS PRIOR TO THE START OF ANY CHANGES TO OR AROUND THE OUTSIDE OF THE UNIT NOTE: NO WORK MAY BE STARTED OR ALTERED (if changes are made during construction) UNTIL FINAL APPROVAL IS RECEIVED

Owner (print):	Date:	Unit #
Phone #	_	
Description of work requested: Explanations mu	ust be detailed, including meası	urements & diagrams
with changes or additions clearly highlighted when a	pplicable (use separate sheet fo	or drawings if needed):
CONTRACTOR (name and #):		
Approximate start date:		
 Working Hours Mon-Sat Stonehedge is not required to provide permits County) is the full responsibility of the owner The job site MUST be kept clean daily (free from (and signage) must be removed immediately for the Changes in painting colors from the current Months and of Directors has the final say on the guidelines and approval of your request 	and a copy must be turned into om any potential flying debris) a following completion of the job IUST be accompanied by chart s	es a permit (City or or the office. and ALL work materials samples (base & trim)
Date Approved:Approval Signature (Ma	anager)	
Board Approval/Reviewed by: 1)	2)	
Date Denied: Reason for denial:		
Additional information needed:		

OWNER SIGNATURE: (Do not sign until Board/Manger approval is received)