

**REQUEST FOR LANDSCAPE AND/OR BUILDING ALTERATIONS OR IMPROVEMENTS**

ASSOCIATION PROJECT   
OWNER PROJECT

ASSOCIATION NAME: \_\_\_\_\_

PRESIDENT/OWNER NAME: \_\_\_\_\_ UNIT/BADGE# \_\_\_\_\_

OWNER ADDRESS (IF APPLICABLE) \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

CONTRACTOR/OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

REQUEST DESCRIPTION (include attachments): \_\_\_\_\_

**INSTRUCTIONS/ASSOCIATION/OWNER RESPONSIBILITIES**

1. The executing contractor's proposal along with a sketch of the alteration **MUST BE ATTACHED TO THIS FORM** detailing dimensions, materials, colors and distance from the foundation/exterior perimeter of the unit and or project area.
2. Work may not begin until you receive a copy of the final signed Management's Review.
3. It is the Association's/Owner's responsibility to notify the Association's Community Association Manager when work is completed.
4. Any irrigation modifications required are the sole financial responsibility of the Associations or Owners (Circle One). Any/all irrigation modifications must be made by the Master Irrigation Contractor.
5. Any Landscape and/or Building Alteration modifications required are the sole financial responsibility and future maintenance of the Associations or Owners (Circle One). The Federation Landscape Contractor will submit a written report which includes: Liability, Warranty Conditions, Maintenance Conditions and Additional Costs (If applicable)

\_\_\_\_\_  
OWNER SIGNATURE – PRINT NAME & DATE (IF APPLICABLE)

\_\_\_\_\_  
ASSOCIATION OFFICER SIGNATURE - PRINT NAME & DATE

**NOTICE: WORK IS NOT AUTHORIZED TO BEGIN PRIOR TO EXECUTED FORM  
BEING RETURNED TO ASSOCIATION/OWNER**

**Return Completed Form to: FirstService Residential • 1904 Clubhouse Drive • Sun City Center, Florida 33573  
Phone: (813) 642-8990 • Fax: (813) 642-8790**

*Complete Page 2, Over*

**LANDSCAPE and/or BUILDING ALTERATION or IMPROVEMENT DETAILS:**

1. Show location of landscape and/or building alteration or improvement
2. Provide landscape alteration/bed area or improvement dimensions in feet
3. Attach any additional information and/or pictures

**Unit/Building**

Back
Front

**OWNER'S ACTION - For Owner's Projects**  
Signatures of those most affected by the landscape and/or building alteration (i.e. roof-mate and neighbors):  
Signatures (Based on documents): Address

1. _____	Print Name _____	_____
2. _____	Print Name _____	_____

**BOARD OF DIRECTOR'S ACTION - For Owner's Projects**  
Board Signatures (Based on documents): Approved Date: \_\_\_\_\_ Disapproved Date: \_\_\_\_\_

1. _____	Print Name _____	Board Comments: _____
2. _____	Print Name _____	_____
3. _____	Print Name _____	_____

**LANDSCAPE CONTRACTOR'S ACTION**  
Landscape Contractor Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Maintenance Conditions: \_\_\_\_\_

Additional Costs: \_\_\_\_\_

**MASTER ASSOCIATION'S ACTION**

Master Management Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

**MANAGEMENT'S ACTION**  
Management Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Copy to Unit Owner and File:	Date: _____
Copy to Association Board:	Date: _____
Copy to Federation Landscape Contractor	Date: _____
Copy to Master Association/ Irrigation Contractor	Date: _____