REQUEST FOR MODIFICATION

Fill out this form completely and submit with all required documentation:

Hand deliver: Palmira Golf & Cour Bonita Springs, FL 34135	ntry Club MHOA, c/o KEB Management S	Services, 11100 Bonita Beach Rd. # 101,
Mail: Palmira Golf & Country Clul	MHOA, c/o KEB Management Services,	6017 Pine Ridge Rd., Naples, FL 34119
Email: <u>bloomk@KEBMgnt.com</u>		
Name of Resident Requesting Mod	ification:	
Palmira Address:		
Email:	Phone:	
Please describe the modification be	ing requested. Include colors, size, materi	als, etc.
	c: f insurance, occupational license, permits i	
I/We understand that approval of or that this request is granted as presen	ounty code requirements is our responsibili	have the job started. I/We acknowledge I/We understand that any expense incurred ity. I/We understand that the ARC has up to
Signature of Applicant	Signature of Applicant	
Approved	Approved with tree replacement	Approved/Denied By:
Yes No	Yes No	
	_	