Architectural / Change Form Application – Pg. 1 of 3 Princeton Place 2 Condominium Association, Inc.

Community Management Associates, Inc. 3806 Exchange Ave, Naples, FL 34104 Phone (239) 351-5959 FAX (239) 351-5959 tbennetts@cmacommunities.com

Unit #				
Applicant:		Date:	/	/
Best Phone #:	Alternate Pl	none #:		
Description of Addition, Change, Modification, Etc.				
Submit a description of all proposed changes, modification drawings. Submissions must provide the information nedecision. If all required information is not received wit decision until all information is received. Mail, Fax or Elnc. at above address.	ecessary for the Board of Dire h this completed application	ectors to make	e an inforr vill delay i	med rendering a
Description of Change(s):				
Desired Date for Commencing the Work:/				
Expected Completion Date://				
Work to be Performed By:				
Contractor's Florida License #		_		
Notes: 1. Only Florida Licensed Contractors may be used for Plu Wallboards, Cabinets, (attached to walls) & Flooring. 2. An owner who desires to replace or install any hard-surface under flooring that provides sound deadening expectation of Princeton Place at Wiggins Bay Condomir Flooring.) 3. Work that may be done by an unlicensed Handyman is 4. Lanai color is mandated to be the same as the building	urface floor covering anywho qual to or the same as ProFle nium Two Association, Inc. da include Interior Cleaning, Pai	ere in the unit ox 90. (Per An oted March 26	shall also nended ar i, 2018. Se	install hard nd Restated ec. 11.3.3
The undersigned acknowledges that they have read and Renovation Rules. They also understand that until a significant control of the control o				
Annlicant's Signature	Date	/	/	

(Continued on page 2)

Architectural / Change Form Application – Pg. 2 of 3 Princeton Place 2 Condominium Association, Inc.

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CONDITIONS OF APPROVAL:

- All required permits must be obtained and displayed by owner prior to work commencing.
- Contractor must supply the Property Manager with copies of Auto Insurance, General Liability Insurance, and Workers Compensation Insurance.
- Owner agrees he/she is responsible for any and all damage caused to common areas as a result of the project.
- Unit owner and contractor have signed off on **Renovation Rules** attached hereto as page 3.

ADDITIONAL CONDITIONS:					
REASONS FOR REJI	ECTION:				
[] Approved	[] Rejected				
		Board Member's Signature	Date		

Note: Approval of the Board does not constitute any representation or warranty regarding the construction design, methods, materials or compliance with building codes.

Architectural / Change Form Application – Pg. 3 of 3 Princeton Place 2 Condominium Association, Inc.

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Renovation Rules

- All construction debris must be disposed of off-site by the contractor and not deposited in the building's dumpster. Board of Director permission must be obtained on where to park dumpsters or large refuse vehicles.
- Construction crews are responsible for cleanup daily. Any additional clean-up costs, such as washing of the walkways will be billed to the unit owner by the association.
- Work can start no earlier than 8AM and not continue past 5PM.
- No additions or alterations are permitted to the Common Areas. Refer to the Amended and Restated Declaration of Princeton Place at Wiggins Bay Condominium Two Association, Inc. dated March 26, 2018. Sec. 11.
- Elevator Pads are available in the room adjacent to the mailboxes and must be used to protect mirror and walls in elevator. Call the Association Mgr. (239-351-5959)
- There is a no smoking policy for the common areas and walkways. Contractors are expected to adhere to and be respectful of this policy.
- All work requires an **Architectural / Change Form** be submitted to the property manager and Board of Director approval given before any work is permitted to start.
- All work must comply with the Collier County Building Codes and must be permitted and performed by a licensed and insured contractor.
- Wiggins Bay Foundation prohibits construction work on Sundays & Holidays. Also, Contractors
 may not do any work on Saturdays that produces vibration or loud noise such as hammer drills,
 construction saws or hammers.

Unit owner signature	Date:/
() Unit owner phone number	Email address
Contractor name – Print	
Contractor signature	_
Contractor phone number	 Fmail address

MWS:2023-08-23