



Ocean Sands Condominiums
PO Box 8396
Madeira Beach, Florida 33708
OurOceanSands.com

REMODELING APPROVAL FORM

REQUESTER INFORMATION

Name: _____
Email address: _____
Tower – unit#: _____ Date: _____

CONTRACTOR INFORMATION

(complete the contractor information if is not provided on attached letterhead or business card)

Business Name: _____
Contact Name: _____
Email address: _____
Address: _____
Phone: _____ Fax: _____

- Provide a copy of contractor's liability information
 Provide a copy of contractor's construction builders license

DESCRIPTION OF THE PROJECT

Refer to the Remodeling Policy. Provide a description of the project, including approximate timing and location of windows, if applicable. Add additions pages if needed. Instructions for submitting this request are on the last page. Please note additional requirements are listed for windows and sliding doors.

AUTHORIZATION OF THE PROJECT

Approved Disapproved

Authorizing Board Member:

Date:

Comments:

INSTRUCTIONS

This form is used to request approval to modify a unit, per the Ocean Sands Condominium Bylaws and current approved Policy.

There are several options to complete and submit the request. Each is described below:

1. Using a Word Processor (Microsoft Word, Apple Pages, etc.)

Enter information directly in this form and 'save as' or 'export' as a PDF file. Note the folder location where it is saved. To submit this form for approval, click on the link in the [Our Investments](#) page of the OurOceanSands.com community website. Enter the requested information and attach the PDF

2. Scan and Save

Print this form and complete it by hand. Scan a copy of the completed form to your computer (or a public computer). To submit this form for approval, click on the link in the [Our Investments](#) page of the OurOceanSands.com community website. Enter the requested information and attach the scanned PDF.

3. Print and Submit to the Office (by hand, FAX or post)

Print, complete and submit the form to the Ocean Sands Office in person or using the address in the letterhead. The FAX number is (727) 391-0399.

If replacing windows or sliding balcony doors, include the following when submitting your request:

- purchase agreement between owner and contractor to verify they meet the following:
 - the requirements for configuration, alignment and color
 - the requirement for turtle glass where required.
- sales brochure to ensure wind borne debris protection is documented for the the products in the purchase agreement.

Need Help?

Call the Ocean Sand Office, 727-391-0944, with questions, or if you need a copy of this form mailed to you.