SEMINOLE SQUARE ASSOCIATION, INC.

ARCHITECTURAL IMPROVEMENT APPLICATION/REVIEW FORM BOARD APPROVAL IS REQUIRED PRIOR TO COMMENCEMENT OF ANY WORK

NAME:		DATE:	_
UNIT NUMBER:	CONTACT PHONE (1)	(2)	_
EMAIL:			
SPECIFICATION OF PRO		ERATION: YOU MUST ATTAC ES. OWNER IS RESPONSIBI LAW:	
		OVAL DATE SAID APPROVA	
INSPECTION SHOWI	NG THE APPROVED/COMP E MANAGEMENT COMPAN	BMIT A COPY OF PERMIT AI LETION DATE OR, ARRANGI Y OR AUTHORIZED REPRESI MATED COMPLETION DATE.	FOR A FINAL
	UIRED THAT YOU PROVIDE	AKE THEM A PART OF YOUR THIS INFORMATION TO AN	
DELIVER OR MAIL THIS AF	PLICATION AND ALL APPLICA MANAGEME	ABLE ATTACHMENTS TO <u>AMER</u> NT, INC.	I-TECH COMMUNITY
	AMERI-TECH COMMUNITY 24701 US HWY 19 CLEARWATER	N, SUITE 102	
	FOR COMMITTEE	USE ONLY	
Date Property Inspected	: Inspected By: _		
Board Meeting Date:	Approved	Denied	
Terms/Contingency:			
Board Member Signate (Revised 8/2024)	ure, Title	Date	
James Myrthil, LCAM Community Association	on Manager		

Jmyrthil@ameritechmail.com