

Riomar Sands
Condominium Association, Inc.
C/o Elliott Merrill Community Management
835 20th Place
Vero Beach, FL 32960

ARCHITECTURAL MODIFICATION
REQUEST FOR REVIEW

OWNER'S NAME: _____

RIOMAR ADDRESS: _____

DAYTIME PHONE: _____

EVENING PHONE: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____

Approval is hereby requested to make the following modification(s), alteration(s), or addition(s) as described and depicted below, or on additional attached pages as necessary. (Please include details such as the dimensions, materials, color, design, location, and other pertinent data.)

Signature of Owner

Date of Request

CONTRACTOR INFORMATION

CONTRACTOR COMPANY NAME: _____

CONTRACTOR PHONE NUMBER: _____

CONTACT NAME AND NUMBER: _____

PLEASE LIST THREE (3) LOCAL REFERENCES:

NAME: _____

PHONE NUMBER: _____

NAME: _____

PHONE NUMBER: _____

NAME: _____

PHONE NUMBER: _____

COPY OF CONTRACTOR'S LICENSE AND INSURANCE MUST BE ATTACHED TO THIS ARCHITECTURAL MODIFICATION FORM

ARCHITECTURAL MODIFICATION
REQUEST FOR REVIEW

FOR RIOMAR SANDS USE ONLY:

Date Received: _____

APPROVED

DISAPPROVED

Date Notified: _____

Comments:

Signature of Chairperson

PLEASE RETURN DIRECTLY TO THE OFFICE OF
Elliott Merrill Community Management
835 20th Place
Vero Beach, FL 32960
772-569-9853 (P)/772-569-4300 (F)
email: cheric@elliottmerrill.com
www.elliottmerrill.com