TBC Owner Name:	Unit #:

TANGERINE BAY CLUB ASSOCIATION PART D: REQUEST FOR APPROVAL OF MAJOR UNIT RENOVATION

This Request for Approval form must be accompanied by:

- 1) A weekly work schedule; material revisions to this work schedule must be approved by the General Manager.
- 2) A selection schedule for finished products, e.g. cabinets, flooring, etc.
- 2) Design documents prepared by a FL-licensed professional (Architect/Engineer/Contractor) hired and paid by the Owner.
 - Drawings submitted for approval must be signed and sealed by the responsible design professional.
 - Drawings must show all changes, modifications, impact to structural components, systems, and Common Elements.
 - Load bearing elements, including but not limited to walls, floors, columns, and ceilings must be clearly identified and the extent of impact denoted on the documents.

OWNER(S) FULL NAME:		
ADDRESS:	Gulf of Mexico Drive, Longboat Key, FL 34228	Unit #
TEL/CELL(s):		
EMAIL(s):		
CONTRACTOR NAME & PHONE	E#:	
ON-SITE PROJECT MANAGER ((if not contractor)	
CONTRACTOR LICENSE #:	NAME OF LICENSEE:	
Application Date for Building Perm	nit:Permit Number:	
Start Date for Demolition:	Est. Completion Date:	
after approval must be approved via 1. Change of Current Floor Planeto load bearing walls and boundary	TO UNIT AND/OR GARAGE - Address items that part the ADDENDUM at the end of this form. - Describe and attach drawings/plans by a FL-licensed convex walls are prohibited. Relocation of dinette sliding glass of a certain Units with specific Association approval.	ntractor, architect, or engineer. Changes
2. New/Relocation of Interior Duc	ctwork – Describe and attach drawings/plans by a FL-lice	nsed contractor, architect, or engineer.
	de brand name, dimensions, exterior color, picture of exterior fireplace vent is not permitted to be changed.	rior vent cover, and illustration of

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4. Other Exterior Vents (for dryer, kitchen exhaust fan, tankless hot water heater) - Include brand name, dexterior vent cover, and illustration of exterior location. Exterior color must be white. Kitchen vent must be sliding glass doors; alternative location for third floor Units will be considered for approval.	
5. Gas Supply Line Relocation and/or Alteration – Requires use of FL-licensed gas plumber. Provide plumber. Describe relocation and/or alteration.	umber's name and license
6. Plumbing – Core drilling through the floor concrete slab is prohibited; no relocation of drains. Require plumber. Provide plumber's name and license #. Describe work to be done.	res use of FL-licensed
7. Electrical System – Requires use of FL-licensed electrician. Provide electrician's name and license #. Do be done, including in garage. If shallow trenching for code compliant electrical conduit is requested, the O licensed Structural Engineer at the Owner's expense, to conduct GPR testing to verify and mark the location and provide drawings to show proposed width, depth, and location reference to structural walls and column	wner must engage a FL- n of post-tension cables
8. Fire Sprinkler System – Requires FL-licensed sprinkler contractor for relocation/alteration, change of sand/or height, change of piping, and/or installation of additional sprinkler heads. Provide name of sprinkler and describe work to be done, including in garage	
9. Kitchen Renovation - Attach drawings by kitchen designer.	
10. Bathroom(s) Renovation - Attach drawings/plans by bathroom designer.	

<u>Unit #: _</u>

TBC Owner Name:

11. **Floor/Ceiling Concrete Slabs** - No intrusion of any kind into floor/ceiling concrete slabs without prior approval and review by a FL-licensed Structural Engineer at Owner's expense. If approved, the Owner's Structural Engineer must use GPR testing to verify and mark the locations of post-tension cables on the surface to be drilled. Provide engineer's name and license #. Submit detailed drawings of your proposal. Final stamped and sealed SE plans are required before commencement of work.

TBC Owner Name:	<u>Unit #:</u>
	(Page 3 of)
12. Drywall Replacement	
13. Exterior Stucco Walls – Patching of exterior stucco around with the General Manager.	wents must conform with existing stucco pattern and color. Discuss
decorative items;	ading but not limited to installation of wire devices, antennas, or any
• Satellite dish location must be approved by the Board.	
14. Exterior Lanai & Entry Courtyard Tile Floors - Changes	to any lanai/entry courtyard tile surface are prohibited.
15. Provide any supplemental details you may wish to add	
AGREEMENT TO ABOVE SCOPE OF WORK:	
Contractor Signature:	Date:
Owner Signature:	Date:
Approved Denied	
TBC Representative:	Date:

TBC Owner Name:	Unit #:
I DC Owner Manie:	Ullit #:

Tangerine Bay Club Association, Inc ADDENDUM: REQUEST FOR APPROVAL OF UNIT ALTERATIONS

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OWNER(S) FULL NAME:						
ADDRESS:	Gulf of Mexico Drive,	Longb	oat Key, FL 34228		Unit #	
TEL/CELL(s):						
EMAIL(s):						
CONTRACTOR NAME & PHO	ONE:					
ON-SITE PROJECT MANAGE	R (if not contractor)					
CONTRACTOR LICENSE #: _		NAN	ME OF LICENSEE:			
Is a new Building Permit require If new: Application Date for Bu			Permit Number: _			
Will Addendum work extend the	e length of project:Yes _	No	Est. Completion Dat	e of Project: _		
Describe in detail the Addendo Include design drawings by a						a.
OWNER & CONTRACTOR	AGREEMENT TO SCOPE	OF AD	DENDUM WORK:			
Owner Signature:				_ Date:		
Contractor Signature:				_ Date:		
TBC General Manager Accep	tance:			_ Date:		