

Isle Verde Neighborhood Association Proposed Project Authorization

Property Owner: _____ Email: _____ Cell _____
Isle Verde address: _____ Off season phone: _____
Submission Date: _____

Project Scope: Interior _____ Exterior: _____ Both _____
Will you require a dumpster (Y/N) _____ and/or a Port-O-Let (Y/N) _____ during the project

Please describe the scope of your project- add attachments & sketches if necessary:

Estimated duration (months): _____ Estimated start date: _____
Estimated cost range for total project _____

Please be aware that work on all projects classified as MAJOR can only be done between May 1 and October 31st. Work cannot be performed between December 24th through January 1 as well as national holidays.

Property Owner, designated Project Manager and Contractor must read and agree to all applicable policy and regulations as posted on the Isle Verde & Pelican Bay Foundation web sites. All work and permitting must be in compliance with Collier County regulations.

Contractor: _____ Contractor cell: _____
Contractor Address: _____ Contractor License #: _____
Will property owner be in residence the entire duration of the project? (Y/N) _____
If NO who will have overall responsibility for project oversight? _____
Contact information for delegated Project Manager _____

Signature of the Property Owner _____ Date: _____
Received by Isle Verde Architectural Review Board _____ Date: _____
Approved by ARB _____ Date: _____
Approved by Isle Verde Board _____ Date: _____
Project will be classified as MINOR _____ Major _____
Pelican Bay Foundation approval will be required. (Y/N) _____

Copy to ARB, Isle Verde Board, Pelican Bay Foundation (if required), Property Owner