

ESC

ENCHANTING SHORES CO-OP, INC.  
17 Turquoise Avenue, Naples, FL 34114  
Phone: 239.775.1221 & Fax: 239.775.5955



**APPLICATION FOR PROPERTY IMPROVEMENTS**

NAME: \_\_\_\_\_

PH #: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ {Please Print all Information Clearly!}

**READ CAREFULLY PRIOR TO SIGNING:**

It is the full responsibility of the Shareholder/contractor to verify with the County whether a County Permit is required for the work planned. If you are uncertain, you should call the County at 239-252-5520. Furthermore, it is the Shareholder's responsibility to obtain such Permit{s}, if required, prior to commencing the actual work on the planned improvement. Failure to do so will deem any ESC approval herein null and void; and such non-ESC permitted improvements{s} must be immediately removed. Any and all Impact/Permits Fees are at the obligation of the Shareholder and their sole responsibility.

Shareholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Work to be completed by Owner \_\_\_\_\_, or Contractor: \_\_\_\_\_

License # \_\_\_\_\_; County Permit # \_\_\_\_\_ {copy attached}

**IMPROVEMENT REQUESTED:**

Driveway \_\_\_\_\_ \*\*\* Exterior Painting \_\_\_\_\_ Irrigation System \_\_\_\_\_  
Patio Blocks \_\_\_\_\_ Roof \_\_\_\_\_ Screen Room \_\_\_\_\_ Sidewalk \_\_\_\_\_  
\*\*\*Siding \_\_\_\_\_ Steps \_\_\_\_\_ Windows \_\_\_\_\_

\*\*Tree Planting and/or Tree Removal \_\_\_\_\_ {COMPLETELY REMOVE STUMP}

Other \_\_\_\_\_ Please Explain: \_\_\_\_\_

\*\*Type of Tree to be Planted and/or Removed: \_\_\_\_\_

\*\*\*Siding and/or Exterior Painting/Indicate color & include a sample: \_\_\_\_\_

**SEE REVERSE SIDE FOR FURTHER DETAILS & APPROVALS**

**SPECIAL NOTATION:** A sketch of existing structure/lot showing the proposed improvement{s} shall be attached to this form and should include detailed dimensions and any pertinent information.

**APPLICATION PROCESSING TIME FRAMES**

Permit will be processed within 5-7 business days.

**NO WORK ON ANY PROJECT CAN COMMENCE UNTIL YOU RECEIVE AN APPROVAL OF YOUR APPLICATION. RETURN THIS FORM TO PROPERTY MANAGER WHEN WORK IS COMPLETED FOR FINAL INSPECTION**

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**INSPECTION, APPROVAL AND/OR DECLINE SECTION**

Inspection by: \_\_\_\_\_  
Buildings & Grounds Committee/Property Manager

Application Approval Date: \_\_\_\_\_ CO-OP Permit #: \_\_\_\_\_

Application Decline Date: \_\_\_\_\_ EXPIRES: (6 mos.)

Reason for Decline: \_\_\_\_\_

Concrete Forms Inspection Date: \_\_\_\_\_ Approved by: \_\_\_\_\_

Poured Concrete Inspection Date: \_\_\_\_\_ Approved by: \_\_\_\_\_

**NO WORK, EXCEPT OF AN EMERGENCY NATURE APPROVED IN WRITING BY ANY DIRECTOR OR THE PROPERTY MANAGER, MAY BEGIN BEFORE 8:00AM OR CONTINUE PAST 6:00PM MONDAY THROUGH SATURDAY.**

**NO WORK ON SUNDAY UNLESS APPROVED BY ANY DIRECTOR OR THE PROPERTY MANAGER.**