

Please provide a copy of the contractor's insurance policy and also provide a statement naming Long Grove as an additional insured. Attached: Yes: _____ No: _____

Please provide the name and address for the electrician you will be using(if applicable). Are they licensed in South Carolina? If so, please include their license number:

Please provide the name and address for the plumber you will be using(if applicable). Are they licensed in South Carolina? If so, please include their license number:

Will this requested project propose to make any alteration to any Common Element in the building to include pipes, lines, conduits, and or apparatus or to any load bearing portion of the Unit? Yes _____

No: _____

Please Provide

Details: _____

Will the proposed renovation in any way disturb the Gypcrete fire and sound insulation slab on the floor? Yes: _____ No: _____ If so, please provide details below:

Will the proposed renovation replace any carpeting with a tile, marble, vinyl, hardwood floor or any other hard surfaced flooring material? Yes: _____ No: _____

For renovation requests involving window and/or sliding door replacements:

The ACC has approved specific windows for our property for consistency and all renovations **must** use one of these manufacturers' products. City permits must be obtained and there is a code requirement for wind rating. Specific installation guidelines have been approved by our POA Engineer. Will the proposed renovation involve replacing any windows or sliding doors? Yes: _____ No: _____

Details: _____

Please allow 30 days to process this request

To be completed by the ACC

Date ACC received request: _____

ACC Action: Approved without conditions: _____

Approved with the following conditions: _____

Additional information required: _____

Not approved for the following reason: _____

ACC Signatures: _____

Date of ACC action: _____

Date Homeowner notified: _____

Mail completed form to kpate@ravenelassociates.com