

**APPLICATION FOR APPROVAL TO PROCEED WITH  
INSTALLATION OF WINDOWS**

TO: Bouchelle Island  
426 Bouchelle Dr.  
New Smyrna Beach, FL 32169

FROM: \_\_\_\_\_ (Owner)

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Building \_\_\_\_\_ Unit \_\_\_\_\_

Phone Number: \_\_\_\_\_

SUBJECT: APPLICATION FOR APPROVAL TO PROCEED WITH INSTALLATION OF WINDOWS  
Windows must conform with the rest of the building in color and style. Must obtain a Building Permit as required by the New Smyrna Beach Building Department.

INSTALLER: Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

State License No.: \_\_\_\_\_

Insurance: Gen Liab Amount \_\_\_\_\_ Worker's Comp \_\_\_\_\_

Ins. Co.: \_\_\_\_\_ Exp. Date \_\_\_\_\_

( ) Brochure on style of windows being installed (must match rest of building)

( ) Color of window frames \_\_\_\_\_ (must be same color as rest of building)

Owner Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Board Signature: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date: ( ) Approved ( ) Disapproved \_\_\_\_\_

Note to Bouchelle ARC, this application has been pre approved by Association XXII, so the ARC can review to insure compliance with the CSA Rules and Regulations.