Unit #

## THE INLETS

200 Inlets Blvd. - Nokomis FL 34275

## REQUEST FOR IRRIGATION SERVICES

| NAME:                                  |                     | PHONE:                        |               |       |  |
|--|---------------------|-------------------------------|---------------|-------|--|
| PLEASE CHECK ITEMS OF YOUR             |                     |                               |               | E AND |  |
| Broken sprinkler head:                 |                     | Coverage adjustment:  Others: |               |       |  |
| Donuts missing or broken:              |                     |                               |               |       |  |
| Please provide details below:          |                     |                               |               |       |  |
| Indicate planned start date:           | and co              | mpletion date:                |               |       |  |
| Will there be:                         |                     |                               |               |       |  |
| Architectural changes:                 | Yes:                | No:                           | I don't know: | _     |  |
| Landscape changes :                    | Yes:                | No:                           | I don't know: | _     |  |
| RESPONSIBILITIES OF THE REQUES         | STER:               |                               |               |       |  |
| The requester will be responsible for: |                     |                               |               |       |  |
| > Any necessary repairs to under       | •                   |                               |               |       |  |
| Any future damage of any type t        | hat may be caused t | by the change.                |               |       |  |
| Signed:                                |                     | Date:                         |               |       |  |
| Unit Owner                             |                     |                               |               |       |  |

See Reverse Side for Committees' Response

## (Owners do not write on this side of application. )

| Provisional Acceptance Granted:       | Yes:                    | No: :  |
|---------------------------------------|-------------------------|--|
| PROVISIONS <u>:</u>                   |                         |  |
|                                       |                         |  |
|                                       |                         |  |
|                                       |                         |  |
|                                       |                         |  |
|                                       |                         |  |
|                                       |                         |  |
|                                       |                         |  |
| FINAL PERMISSION GRANTED:             | Yes:                    | No:  |
| If 'yes", you are authorized to proce | ed in accordance with t | he specifications submitted with your application. |
|                                       |                         |  |
| For Architectural Committee:          |                         |  |
| For Landscape Committee :             |                         |  |
|                                       |                         |  |
| For Irrigation Committee:             |                         |  |
|                                       |                         |  |
|                                       |                         |  |
| Da                                    | te Approved:            |  |