

**NEWCASTLE CONDOMINIUM ASSOCIATION**

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**APPLICATION FOR HURRICANE PROTECTION APPROVAL**

I/We, the undersigned unit owners, understand that pursuant to Hurricane Protection Regulations for the Newcastle Condominium Association, Inc., the Board of Directors must approve each installation of hurricane protection. I/We represent that information contained below is correct.

**PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:**

⇒ Full name of applicant(s): \_\_\_\_\_

⇒ Unit No: \_\_\_\_\_

⇒ Installation Contractor:

○ Name: \_\_\_\_\_

○ Address: \_\_\_\_\_

\_\_\_\_\_

○ Telephone: \_\_\_\_\_

○ License #: \_\_\_\_\_

⇒ Date of Installation: \_\_\_\_\_

⇒ Attach a copy of shutter proposal or contract with plans and specifications.

By signing this Application, it is agreed that I/we have received and read a copy of the Hurricane Protection Regulations for the Newcastle Condominium Association, Inc. and that I/we agree to abide by the Regulations. I/We further acknowledge and agree that I will be responsible for any costs or professional fees incurred by the Association to compel my compliance with the Hurricane Protection Regulations. I/We agree that the foregoing information is true and correct.

\_\_\_\_\_  
Owner's signature

\_\_\_\_\_  
Date

**ACTION OF BOARD OF DIRECTORS:**

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APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_ DATE OF DECISION \_\_\_\_\_

BY: \_\_\_\_\_ or \_\_\_\_\_  
Association President/Secretary Manager for the Association

**PLEASE CONTACT PHILIPPE GABART, ASSOCIATION MANAGER,  
WITH ANY QUESTIONS OR COMMENTS AT 239 / 947-4552**