ASSOCIATION RENOVATION PLAN
(REQUEST FOR MODIFICATION)
CASA BONITA I CONDOMINIUM ASSOCIATION, INC.
Check List

Effective Date: 08/25/2026

Date: _____ Name: _____

Unit _____located at Casa Bonita I, 26000 Hickory Blvd, Bonita Springs, FL 34134

Contact Phone Number: _____ Alternate Phone Number:_____

Submit this document and all attachments 30 days before you start work.

Please attach the following items:

☐ Name of Companies Performing Work and their Certificate of Insurance

☐ Copy of the Occupational License and a copy of necessary Permits

☐ Diagrams of modifications drawn to scale.

☐ Completed Architectural Control Forms (2 pages)

I (We) understand I am (we are) responsible for the following: Please initial each line indicating you understand your responsibilities.

_____ to protect our elevators during the remodel process.

_____ to ensure all removal and deliveries utilize the north elevator.

_____ to place the Furniture Pads in the North elevator before any delivery Or removal of debris.

_____ to remove furniture pads at the end of the day.

_____ for any cost associated with the removal of items from your unit including but not limited old wood, cabinets, boxes, furniture, appliances, mattresses.

Service calls, repairs and construction work are allowed only during the hours of 8:00am to 5:00pm Monday through Friday. Not on weekends or holidays, except in an emergency i.e., Plumbing, Electrical, HEVAC, etc.

Please return this form and all required information to the address below:

Thomas Pfuner Quicci, Property Manager
c/o Resort Management Group
9250 Corkscrew Rd., Suite 9
Estero Springs, Florida 34928
Email: tpfuner@resortgroupinc.com
239.645.4187

ASSOCIATION RENOVATION PLAN

CASA BONITA I CONDOMINIUM ASSOCIATION, INC. Page 1

Date: _____ Name: _____

Do you plan to modify or remove any interior walls? ___Yes ___ No **If yes, please describe: _____.**

_____

Kitchen: __________

_____

_____

Bathrooms: Please note: YOU MAY NOT move the location of the toilet in the guest or master bathrooms. Do you plan to reroute or move any plumbing or sewer access? ___YES ___ NO. If yes explain below. Also describe other changes to the bathroom(s).

NOTE: to help us locate the source of water leaks in the building, please install a utility access door in your bathroom over the toilet (for more information please contact our property manager).

_____

Hurricane Protection: NOTE: You must maintain hurricane protection up to the exterior wall of the lanai; both white Roll-Down Shutters and white framed Hurricane glass are acceptable. Do you plan to change your hurricane protection? ___ YES ___ NO Please describe the proposed changes. There are drain holes on the floor of all lanai's. Please make sure these are not blocked when replacing shutters and modifying floor. If you are installing electric shutters, they must have a manual override and a crank. Please confirm shutters will have the manual override _____ (Initial)

_____

_____

Lanai: Do you plan to modify your lanai? Please describe: _____

_____

Flooring: Do you plan to change the Floor Covering ___Yes ___ No What product will you use for flooring? _____ If yes, what underlayment product do you plan to use (**you must use an underlayment on floors 2-8**).

If you are doing some new flooring **inside the unit** be sure your installer is using an approved underlayment. The underlayment should go under all non-carpeted floor surfaces. Casa Bonita I requires **PROFLEX SUPER SIM-90** or **Super SAM 125** or an engineering equivalent.

If you are doing new flooring in your **Lanai** be sure your installer is applying a waterproof membrane applied directly to the concrete lanai flooring CBI requires **RedGard** Waterproofing and Crack Prevention Membrane UPC Code 010186764375. Two coats applied in the opposite direction from each other.

6" concrete slab STC = 52

LANAI FLOORS: Lanai floors are constructed to pitch water to the outside (beach side). If you are planning to add, replace, or modify the floor to your lanai, please insure with your contractor that the pitch level is correct to shed water to the outside to prevent water pooling on the floor. There are drain areas on each lanai that cannot be blocked when replacing storm shutters or flooring. No low point or swale where water can pool and permeate through the grout.

Electrical: Note: Please provide the following information to your contractor. The electrical service for each unit is **125 AMPS**.

ASSOCIATION RENOVATION PLAN

CASA BONITA I CONDOMINIUM ASSOCIATION, INC. Page 2

Doors/Locks: Do you plan to install a new lock on the door? ___ Yes ___ NO, will it be a digital lock? ___ Yes ___ NO
Keypad deadbolt AKA touchscreen. Must be Satin Nickel in appearance and it must work with a Schlage C key 5-Pin Key lock cylinder. (keyed to your unit key and our master key).

Water Heater: Do you plan to replace your **water heater with something other than what is already installed? ___ YES ___ NO**: What do you plan to install?
New water heaters must be installed with a pan under the tank.

_____

Other Changes to your unit: _____

_____

_____

Dumpster: Do you plan to use a "dumpster" for the removal items/materials? ___ Yes ___ NO Please contact our property manager to determine the parking location of the dumpster.

Note:

- Any expense incurred due to City/County code changes will be the responsibility of applicant.
- CB1 trash shoots and dumpsters are not to be used for renovation debris.

I/We hereby make application for the above described item to be approved in writing by the Architectural Control Committee and/or the Board of Directors.

I/We understand that approval of our request must be granted before I/We can have the job started. I/We also acknowledge that we could be forced to have the item removed if it is installed without approval. I/We also acknowledge that this request is granted AS PRESENTED to the Board of Directors and must be completed as presented. Any changes are not approved and will not be accepted without the approval of the Committees. I/We understand that the Architectural Control Committee has up to 30 days to approve this request.

_____ _____
Signature of Applicant Signature of Applicant

The above request for modification to Unit# _____ has been:

( ) DISAPPROVED ( ) APPROVED ( ) APPROVED WITH CHANGES OUTLINED IN LETTER

Date: _____ Property Manager: _____

Date: _____ Board Representative: _____