

**COVE TOWERS PRESERVE
CONDOMINIUM ASSOCIATION, INC.**

465 Cove Tower Drive – Naples, FL 34110
Phone: 239-593-3977 Fax: 239-593-3492

Shutter Request Form

TODAY'S DATE: MONTEGO NEVIS

OWNERS NAME: UNIT #:

Representative:

Company Name:

Address:

Phone: Fax: Email:

Shutter Type:

Shutter Color:

Accordions:

Accordion Color:

PLEASE SUBMIT THE FOLLOWING:

Supplier Certification Form:

Site Plan:

Product Information:

Permit Number:

Insurance Information:

License Information:

If elevator hoistway is to be used to transport oversized materials:

Signed Procedure for using Elevator:

Signed Otis Exhibit A:

Signed CTP Elevator Hoistway Release:

STATUS OF REQUEST: Association requirements HAVE BEEN MET and approval has been granted to proceed with the scope of work described on receipt of PERMIT NUMBER.

Approved by: _____ Date _____

Property Manager

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Hurricane Shutter Installation Requirement

1. Lanai (Rear of Building): Boxes, tracks and mullions must be BRONZE to match screen enclosures, slats must be WHITE.
2. Balcony (Front of Building): Accordion type; slats, tracks and mullions must be BRONZE.
3. Tracks must align with existing screen mullions and be mounted a minimum of 3 inches away from the mullions to facilitate screen mesh changing.
4. NO permanently fixed storm bars are allowed. Shutter must meet or exceed the wind tunnel pressure values for that particular location.
5. Site specific drawings relating to the lanai must be provided stating that the wind loading capability is adequate for that location. Generic drawings and sketches are not acceptable. All site specific drawings will be reviewed by the Property Manager prior to approval.
6. Copy of Property Manager's approval should be onsite with other city and/or county approvals when installation takes place.
7. Public liability of \$1,000,000 is required and a Certificate of Insurance naming Cove Towers Preserve Condo Association as additional insured. Proof of Workers Compensation coverage is required for all employees i.e. salesmen, installers and electricians.
8. In addition, a copy of your business license must be in place before work commences and a properly signed copy of the Supplier Certification Form has been returned.
9. If elevator hoistway will be used to transport oversized materials, Otis Exhibit 1 and Cove Towers Preserve Elevator Hoistway Release must be signed and copies returned to Property Manager before approval given.

NOTE: Work shall only be carried on Mondays through Friday except major Federal holidays (New Year's, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas), between the hours of 8:00 A.M. and 5:00 P.M.

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SUPPLIER CERTIFICATION FORM

_____ The supplier/installer of hurricane shutters for
(Company name)

Montego / Nevis Unit Number _____,
(Circle one)

hereby certifies that all materials of construction, methods of installation, applicable permitting and documentation, qualifications of design and installing personnel, and all other matters requested by local, county, state or federal agency having jurisdiction will be fully satisfied.

Signed Name: _____

Printed Name: _____

Position: _____

Date: _____

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Procedure for using Elevator to Transport Objects on Top of Cab

**This procedure applies to the transportation of objects on top of an elevator cab
where weight and height restrictions can be met.**

Procedure: Use of this policy will be granted when the following conditions are met:

1. The contractor will be responsible for the cost of Otis Service personnel required to operate the elevator. This cost will be paid by the contractor directly to Otis Elevator.
2. Otis Elevator requires a release of liability from the contractor. A copy will be provided to the Cove Towers Preserve property manager.
3. Cove Towers Preserve requires that the owner provide indemnification for any damages resulting from use of the elevator and access to /from elevator.
4. The property manager and / or maintenance personnel must be in attendance during the use of the elevator.
5. Confirmation of all requirements must be provided the property manager in sufficient time to be able to post a two (2) day notice that the elevator will be out of service and indicating the approximate hours.

Contractor

I have read, understand and will comply with the requirements.

Company: _____

Signed: _____

Printed Name: _____ Date: _____

Unit Owner

By signing this document, I agree that I have read and fully understand it's intentions. I also agree that Cove Towers Preserve, it's Board of Directors, employees and agents indemnified from any claims and/or lawsuits resulting from damages to both personal and association property. Furthermore, should damages occur to association property, I am responsible for the restitution of said property to its prior condition.

Signed: _____ Building / Unit: _____

Printed Name: _____ Date: _____

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Elevator Hoistway Release

The elevator hoistway is a dangerous work environment. Persons requiring Otis assistance to access the hoistway must unconditionally comply with procedures as established by Otis Elevator Company and Cove Towers Preserve Condominium Association personnel.

This work is inherently dangerous and Cove Towers Preserve Condominium is allowing the elevator use for access through the escape hatch for hurricane shutter transport, “the Work”, the Condo Owner and the Customer of Otis convenience and at their special request. The undersigned, therefore, hereby assumes complete responsibility for, and agrees to indemnify, defend and save harmless, Cove Towers Preserve Condominium and its employees, from any and all damages and claims for damages asserted by Otis Elevator Company, the Customer of Otis, the Trade and any of each of their employees or agents, and/or by any third parties arising out of or connected with the performance of the above work. The aforementioned indemnities shall include, without limitation, any liability for damage done to the building, elevator or its appurtenances, or injury to persons, including death, however caused.

The terms and conditions of this release must be unconditionally accepted. The Customer of Otis and the Condo Owner shall assume all liability and be responsible for obtaining approval for use of the elevator from Cove Towers Preserve Condominium Association. By signing this agreement, all prior representations or agreements not incorporated herein are superseded.

The undersigned has authorization to sign this agreement as representative or agent.

Accepted For:

Customer of Otis:

By: _____ Date: _____

Condominium Owner:

By: _____ Date: _____

Cove Towers Condominium Association Board

By: _____ Date: _____

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