



Condominium Association Approval Form

Owner Information:

Property Owner: _____ STRAP #: _____

Owner Email: _____ Owner Phone: _____

Job Address: _____

Contractor performing the work:

Contractor: _____ License #: _____

Contractor Address: _____

Contact Person: _____ Email: _____

Contractor Phone: _____ Fax: _____ Construction Value: _____

Approved description of work to be performed:

Approved by:

Association Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Date: _____

Signature: _____

Print Name: _____

Title: _____