

Banana Bay Hurricane Shutters Form

Unit Number: _____ Owner Name: _____

Date of Application: _____ Planned Date of Installation: _____

Unit Structure Inspected By Banana Bay Maintenance: _____
Name Date

Contractor Business Name: _____ Phone: _____

Address: _____ License Number: _____
_____ Insurance Agent: _____

Attach to application:

1. Proof of liability and Workman's Compensation insurance
2. Current Brevard County Business license
3. Proof that the City of Cocoa Beach has given engineering approval
4. Building permits that may be required

Unit Owner and Contractor verify that each have read and understand the Banana Bay Rules, and Policy & Procedures for the type, style, color, installation specifications of Hurricane Shutters. The Unit Owner understands that all costs associated with removal and re-installation of Hurricane Shutters are the complete responsibility of the Unit Owner and responsibility transfers to future owners. If repairs and/or maintenance to the unit requires removal of the hurricane shutters, the Unit Owner will arrange removal and storage in a manner that does not interfere with Banana Bay Maintenance or Contractors. If hurricane shutters are not removed to permit maintenance and/or repairs, the owner agrees to a minimum charge of \$500 for removal. Banana Bay nor its contractors will not necessarily reinstall hurricane shutters. Banana Bay is not responsible for damage to hurricane shutters if they are in fragile shape.

Signatures:

Signature Unit Owner Date Contractor Signature Date

Banana Bay Approval: _____
Printed Name Signature Title Date

When application is complete, email, mail, deliver to:

Clover Key, Inc
110 Imperial St.
Merritt Island, FL 32952
Office: 321-735-7624 Cell: 321-501-1523
Email: Office@cloverkeyinc.com