

CONQUISTADOR HOMEOWNER'S ASSOCIATION, INC.
BOARD OF DIRECTORS MEETING
Tuesday, February 20, 2024

MEMBERS PRESENT:

Matt Hollister, Bldg. 1
Doug Rose, Bldg. 2 – zoom
Marge Drury, Bldg. 3
Rick Cass, Bldg. 4
Absent, Bldg. 5
Renee Drentkiewicz, Bldg. 6
Mike Andrusyszyn, Bldg. 7
Martha Gorton, Bldg. 8
Vince Stapleton, Bldg. 9
Jan Barnes, Bldg. 10
Absent, Bldg. 11
Gary Hoyt, Bldg. 12
Joe Endress, Homes 1
John Calabro, Homes 2
Kathleen Murphy, Homes 3

OTHERS:

Bonnie Guenther, Manager
Others in Attendance (see attached)
Gail & John Mitchell, Lynne Harris,
Robert Luongo, Jean Campbell, Doug
Rose, Margaret Dombkoski, Anne &
Ralph Allbee

The Board of Directors' meeting with Zoom was called to order at 9:30 am after the Pledge of Allegiance. There was a quorum noted, and a motion was made by Martha Gorton to approve the minutes of the Board of Directors' meeting of January 16, 2023. The motion was seconded by Kathleen Murphy, and the vote was unanimously approved.

Treasurer's Report: Joe Endress – See attached.

Kathleen questioned the rust stains on the streets. Water is required for this project and Bonnie is working on getting a water tank to assist with removing the street rust going forward.

Committee Report:

1. Architectural Review Committee – Renee Drentkiewicz – See attached
 - Scott Magnussen, 3121 SE Gran Via Way- House, trim and Door paint
 - Mona Gerard, 1846 SE El Pinar Lane- Paint driveway existing color
 - William Bierlein, Bldg. 12 Unit 307, Lanai window replacement
 - Julie Fall, 3180 SE Gran Via Way, Paint driveway

All these above applications were approved by the Architectural Review Committee and also approved via email by the Architectural Control Board. The owners have already been notified. Any routine application will be reviewed by the Architectural Review Committee first and if approved, they will be forwarded to the Architectural Control Board by email going forward.

The application below was submitted by Bldg. 9 and already approved by the ARC prior to this meeting.

- Bldg. 9 – total replacement of front sidewalk with cement. There was no questions, and a motion was made by John Calabro and seconded by Rick Cass to approve this side walk replacement. The vote was unanimously approved.

2. **Social Committee – Debbie Hollister- See attached.**
The Straw poll will be distributed this week with a return deadline of March 1.
There are 3 events to buy tickets for during the Olympics. The opening ceremony will be \$5/pp. The bingo lunch and closing ceremony tickets will be \$10/pp.
3. **Holiday Lighting Committee – Debbie Hollister- See attached.**
Holiday lighting flyers were handed out to all reps and are to be distributed to all of the residents for 2024. The Board has approved another 3 year contract with the lighting company, however we are a month behind in donations this year. Please have these donations sent to the office as soon as possible. The contract won't be signed until the full amount is received, however it will be approximately \$6500.

Manager's Report: Bonnie Guenther – see attached.

Old Business:

1. **FPL Lighting Project – Matt Hollister**
Matt would like to reactivate the Ad Hoc Lighting Committee. There are 9 members that would like to get involved and Matt feels this would help him and the FPL lighting project. It would also assist with other lighting solutions, like the pool area, etc. This committee would be looking at lighting for all common elements. Rick Cass made a motion to reactivate the Ad Hoc Lighting Committee and it was seconded by Joe Endress. Some discussion followed. There is no time limit on the FPL proposal. There is however, a lead time of one year on the poles from FPL. We also need easement information filed with the county clerk of court and additional members can assist with that. The vote to approve this committee was unanimous. Matt will chair the committee with the members at this time being Mike McPhillips, Jean McIntyre, Jackie Williams, Fred Llewelyn, Lynne Trudel, Mona Gerard, Martha Gorton and David Sherlock. Anyone else that would like to participate in this Ad hoc Committee may come forward within one week only, from the publishing of these minutes.

New Business:

1. **Condo Bldg. Paint Colors – Matt Hollister**
Suzie Heimburger has volunteered to get suggestions from professionals regarding this matter. She was supposed to have something back from Sherwin Williams today. Once she has that information, the Architectural Review Committee will meet and vet out what is presented. There will hopefully be an update at the next Executive or Board meeting.
2. **Fining Committee – Bonnie Guenther- See attached.**
A motion was made by Joe Endress and seconded by Kathleen Murphy to approve the new members of the Fining Committee. The vote was unanimously approved. OJ Thomas stated that Donna Tuttle has resigned from this committee.
3. **March Board of Directors Meeting Date Change – Matt Hollister**
Since the ballroom is going to be utilized on March 19 for the Olympics, a motion was made by Joe and seconded by Martha to move the CHA meeting that day to the clubroom. The vote was unanimously approved.

Discussion item:

- Matt thanked Jeff Saduk for his assistance with painting of the maintenance doors and the dock rails and lighting system. Matt emphasized that the contract with the dock builder, is for the dock only with the fish cleaning station. The benches, lighting and the plumbing are under separate contracts and will be added. The dock is moving along well and looks very nice.

Comments on Agenda items: None

A motion was made to adjourn the meeting by Joe Endress and seconded by Martha Gorton. The motion was unanimously approved, and the meeting was adjourned at 9:55 am.


Renee Drentkiewicz, Secretary


Matt Hollister, President

2/20/24 Board of Directors Meeting Sign In

[illegible]

CONQUISTADOR HOMEOWNERS' ASSOCIATION, INC.

BOARD OF DIRECTORS MEETING

Tuesday, February 20, 2024

9:30 A.M.

AGENDA

PLEDGE OF ALLEGIANCE

CALL TO ORDER

ROLL CALL

APPROVAL OF PREVIOUS MINUTES

TREASURER'S REPORT

COMMITTEE REPORTS Architectural Review Committee – Renee Drentkiewicz
 Social Committee – Debbie Hollister
 Holiday Lighting Committee – Debbie Hollister

MANAGER'S REPORT

OLD BUSINESS:

FPL Lighting Project – Matt Hollister

New BUSINESS:

Condo Bldg. Paint Colors – Matt Hollister

Fining Committee – Bonnie Guenther

March Board of Directors Meeting Date Change – Matt Hollister

Discussion Item:

COMMENTS on agenda items:

POSTED: 2/15/24

**CONQUISTADOR HOMEOWNERS' ASSOCIATION
TREASURER'S REPORT
JANUARY 2024**

FINANCIAL ANALYSIS:

In the category of General Common Areas-Supplies, we had to purchase Rust Gone to continue the maintenance team's battle against the rust stains throughout the complex. That invoice was for \$927. In the Landscape Expense category, mulch was purchased at a cost of \$677 and Florida Irrigation Services worked on several areas around the complex. That expense was \$1059.

In the area of Clubhouse-Supplies and Repairs, the Clubhouse a/c units had their annual service at a cost of \$1.830.

With all other accounts in line or under plan, we ended the month with a surplus of \$7958.

CHECKING/RESERVE ACCOUNTS:

(BANK STATEMENT AS OF February 1, 2024)

\$199,562.13	SouthState Bank Checking Account
\$399,752.17	SouthState Bank Money Market Account
<u>\$259,365.90</u>	Synovus Business CD
\$858,680.02	Total Checking/Reserve Accounts

WATER BILL/CONSUMPTION SUMMARY:

	CITY OF STUART	CONQUISTADOR	DIF	%
DEC/JAN 2023	1,335,000	1,494,578	(159,578)	(12.0)
DEC/JAN 2024	1,345,500	1,255,863	89,637	6.7

February Social Committee Report

Social Committee Straw Poll will be going out this week with a return deadline of March 1st.

Future Events

Thursday February 29, 2024

Leap Year Party!

Buildings 6,9&12

Saturday March 16, 2024

Olympic Opening Ceremony 1PM Clubhouse

Tickets for Baskets/50/50 will be on sale.

Monday March 18, 2024

Lunch and Bingo

Buildings 7&11

Saturday March 23, 2024

Olympic Closing Ceremony 4:30 PM Clubhouse

Sunday March 31, 2024

Easter Sunrise Service

Friday April 5, 2024

End of Year Party

Buildings 2 & 5

Please see your building or house's representative for tickets.



CONQUISTADOR HOLIDAY LIGHTING PROJECT

The project will consist of the following:

- Wrapping the base of the 23 Foxtail Palms along the Conquistador main entrance and exit.
- Lighting the trunk and canopy of the Ligustrum Tree in front of guardhouse.
- Placement of 4 illuminated decorated 48" wreaths on the front gates.
- Lighting the trunk and 20 fronds of the Date Palm in the center island at SE Rinconada Ave and SE El Pinar Lane.
- Rooftop of Clubhouse

Voluntary Sponsorship Levels

Santa Claus \$500

Mrs. Claus \$250

Rudolph \$100

Elf \$50

Snowman \$20

Please make check payable to: CHA

In memo write: Christmas Lighting Project

Take check to Conquistador Office

Deadline for Money Collection Sunday April 26, 2024

Contact Debbie Hollister @772-486-2780 with questions.

Manager's Report
Board of Directors Meeting
February 20, 2024

- The 2023 W-2's and 1099's have been completed along with the 2023 end of quarter and end of year payroll taxes.
- The piano has been tuned.
- The FOB entry system on the tennis court was repaired by Bartlett Brothers.
- Muscle and Wrench did their quarterly service and some repairs on the fitness equipment in the gym.
- The east wall partition project has been finished.
- Summit Fire inspected both the fire alarm system, the fire extinguishers and the fire suppression system in the Clubhouse. They also inspected the fire hydrants.
- Condo Life Safety Inspections were done in all the buildings by Martin County Fire Department.
- The dock will be under construction for the next 3-4 weeks. Please stay off any portion of it, even if it looks safe, until it is deemed safe.
- Lee Wildfeir who has filled in for bookkeeper in the past has been hired. She is a great addition to our organization. Stop by and welcome her!
- Regarding the SIRS and TRS reserve studies, I am actively working on the studies. I was in contact with the reserve analyst last week putting in change requests.

Let me remind you that from signing of contract to completion of the CHA reserve study, one reserve study took over six months with over 10 edits. The contract with the engineering company doing the condo SIRS and TRS reserve studies was signed in July 2023. I had to supply them with a huge amount of information which took months to compile. As I am analyzing and editing **24 reserve studies for 12 different associations**, it is understandably taking more time. I am unable to approximate a finish date, but I know we are getting close.

I have had to work with them to adapt their reserve tables and formats to accommodate our incredibly out of ordinary group of associations. This has taken a great deal of my time.

To release the studies before I feel they are close to accurate serves no purpose as you would be analyzing an inaccurate draft. I know everyone is anxious to see the studies but let me remind you that using the SIRS components is not mandatory until the budget year 2025 and possibly the budget year 2026. The SIRS and TRS studies will not change the amounts you are currently reserving for the budget year 2024.

I am requesting your patience and trust to let me finish the project in my own time. I am extremely proud of the CHA reserve study that was a collaborative effort of me and Sedgwick Valuation Services. I want what is released to you to be just as noteworthy.

Also, their final 50% payment will not be released until the studies are approved by every Board. Patience pays!!!

ADHOC LIGHTING COMMITTEE MEMBERS

2/20/2024

Matt Hollister - Chair

Mike McPhillips

Jean McIntyre

Jackie Williams

Fred Lewellyn

Lynne Trudel

Mona Gerard

Martha Gorton

David Sherlock

Fining Committee

As we had no members of the Fining Committee, I put out word that we were looking for at least three volunteers, and four volunteers stepped forward to serve on the Fining Committee.

OJ Thomas - Bldg 8 (who will serve as head of the Committee)

Eddie Brennan – Bldg 2

Bill Cloud – Bldg 2

Donna Tuttle – Homes

Thank you for your service to Conquistador.

The purpose and functions of the Fining Committee are outlined on pages 4-5 of the Rules & Regulations. It is a committee of last resort after resolution cannot be achieved by the Board of Directors.

The Board of Directors needs to formally recognize the Fining Committee and its members via a motion.

Conquistador

APPLICATION FOR ARCHITECTURAL REVIEW

Please deliver or mail this form with any related information to:

Conquistador Homeowners' Association, Inc.
1800 SE St. Lucie Blvd., Clubhouse
Stuart, FL 34996

Attn. Architectural Review Committee

**PLEASE DO NOT FAX OR
EMAIL APPLICATION TO
ARCHITECTURAL
REVIEW COMMITTEE**

Name of Homeowner / Applicant: WILLIAM BIERLEIN
Project Property Address: 1800 SE ST LUCIE BLVD 12-307
Phone: 772-919-5355 Email: bierleinw@bellsouth.net

Is this a resubmittal? ☐ Yes ☒ No Is this an emergency requiring expedited handling? ☐ Yes ☒ No

Approval is requested for the following modification(s) / alteration(s) to the above property. Type in or print out and fill in the information relating to your project. Please note in the Additional Information section if this request is for an identical replacement / repair / or reconditioning of an existing item:

- | | | |
|--|---|--|
| <input type="checkbox"/> Addition / Alteration | <input type="checkbox"/> Generator | <input type="checkbox"/> Propane Tank |
| <input type="checkbox"/> Decorative Shutters | <input checked="" type="checkbox"/> Hurricane Shutters <u>GLASS</u> | <input type="checkbox"/> Roof |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Lamp Post / Fixture | <input type="checkbox"/> Screen Room / Enclosure |
| <input type="checkbox"/> Exterior Door | <input type="checkbox"/> Mailbox/Mailbox Post Color | <input type="checkbox"/> Siding / Stucco |
| <input type="checkbox"/> Fences | <input type="checkbox"/> Paint* | <input type="checkbox"/> Soffits / Facia |
| <input type="checkbox"/> Garage Door | <input type="checkbox"/> Patio / Deck | <input type="checkbox"/> Water Features |
| <input type="checkbox"/> Garage Screen Door | <input type="checkbox"/> Pool / Spa Equipment | <input checked="" type="checkbox"/> Window Replacement |
| <input type="checkbox"/> Solar - Hot Water | <input type="checkbox"/> Solar - Pool Heating | <input type="checkbox"/> Solar - Photovoltaic |

* Paint Specifics - Please specify colors by code numbers if using the Approved Exterior Colors for All of Conquistador if you are using the approved color palette. If you are not using the approved color palette the applicant must submit color samples for the following:

House Color: _____ Manufacturer: _____

Trim Color: _____ Manufacturer: _____

Garage Door Color: _____ Manufacturer: _____

Front Door Color: _____ Manufacturer: _____

Other: Windows Manufacturer: ANDERSON - BRUNZE

Please check and attach appropriate items as necessary:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Initial Plan(s) / Specification(s) | <input type="checkbox"/> Revised Plan(s) / Specification(s) |
| <input type="checkbox"/> Drainage Surface Water Plan | <input type="checkbox"/> Grading Plan |
| <input type="checkbox"/> Color Sample(s) | <input type="checkbox"/> Texture Sample(s) |

Additional Information:

Anticipated Commencement Date: ASAP Anticipated Completion Date: 45 Days

By signing this Application, the applicant acknowledges that approval by the Architectural Control Board is subject to the following:

1. The applicant agrees that no work shall commence prior to receiving written approvals by the Architectural Control Board.
2. The applicant shall obtain the necessary building permits from the Martin County Building Department. Items requiring building permits can be found at <https://www.martin.fl.us/martin-county-services/do-i-need-permit>
3. The applicant shall use contractors / subcontractors registered with the Martin County Building Department.
4. The applicant shall comply with all provisions of the Conquistador Homeowners' Association, Inc. governing documents as well as all other governing documents.
5. The activities associated with this application shall not infringe on the property rights of others, and shall take place Monday - Friday, 8 AM - 5 PM.
6. Access to the area(s) of construction shall be allowed through the applicants' property. If access to a neighboring property is required, the applicant shall receive written permission from neighboring property owner. The applicant shall be responsible for any repairs to damage caused during the project to neighboring properties or common areas.
7. The applicant agrees not to deviate from the intent or substance of the approved Application. Should a deviation occur, the applicant agrees to rectify the deviation upon notification from the Architectural Control Board.
8. Remodeling debris, including, but not limited to cabinets, doors, rugs, appliances, or other large materials, must be disposed of privately by the owner at his/her expense through a private refuse company or by the contractor performing the work. If a dumpster is required for your project to dispose of debris it is requested that the dumpster be onsite no more than 30 days.

Homeowner / Applicant Signature: Willie Beal Date: 1/31/24

Conquistador Homeowners' Association, Inc. Use Only

Date Received by Architectural Review Committee (ARC):

Recommended by ARC Date: 2/11/24 By: Renee Drenth
Recommended by ARC with Conditions Date: _____ By: _____
Not Recommended by ARC Date: _____ By: _____

Explanation(s) / Comment(s) _____

Date Received by Architectural Control Board (ACB)

Approved by ACB Date: 2/11/24 By: Renee Drenth
Approved by ACB with Conditions Date: _____ By: _____
Disapproved by ACB Date: _____ By: _____

Explanation(s) / Comment(s) _____



H & M Impact Window and Door, Inc
(561) 221-0666
skyler@hmwindowanddoor.com
hmwindowanddoor.com

Contract

OWNER(S)
William Bierlin

ADDRESS
1800 SE St. Lucie Blvd 12-307 Stuart, FL

CONTACT INFO
(772) 919-5355
bierlinw@bellsouth.net

REFERENCE
Contact# 1267
Estimate#

DATE
1/12/2024

COMPANY REPRESENTATIVE
Skyler Haynes

OUR MISSION

"Quality windows are a process, not just a product"

At H & M Impact Window and Door, Inc our mission is to provide you with incredible craftsmanship and quality materials so that your house can also be your home.

WORK DESCRIPTION AND SPECIFICATIONS:

1. Furnish all labor, materials and equipment necessary to complete the removal of existing windows and/or doors and the installation of listed windows and/or doors.
2. Remove existing windows and/or doors from property.

TERMS & CONDITIONS

Contractor: Shall mean H&M Impact Window and Door, Inc.

Binding Contract: This Estimate is valid for 30 days. During said 30 days the Estimate is subject to change or revocation by Contractor without notice. Except to the extent Contractor exercises its right to change and/or revoke the Estimate, the Estimate shall constitute a binding agreement "Agreement" upon acceptance by Owner(s). The date of such Agreement shall be the date of Owner(s)' acceptance. This estimate includes all agreements, documents and conditions between the customer and Contractor

Contract Price: Shall mean the Estimate Price as adjusted by the net of any written change orders.

Payment of Funds and Deposits: Except as otherwise agreed between Owner(s) and Contractor, Owner(s) agrees to pay Contractor the Contract Price in cash, check, or credit card equivalents, according to the following schedule: 50% of the Contract Price upon placement of order; 25% of the Contract Price on the first day of work; and the balance of the Contract Price (25%) upon final inspection.

Defects: Owner understands that there may be existing defects which may not be discoverable until work has commenced. Unless specifically included in the work description and specifications, the cost for labor and materials to repair such defects is not included in the Contract Price. Owner(s) and Contractor agree that the cost for labor and materials to repair such defects will be estimated in writing as needed at the time of discovery and, upon written acceptance, the cost for same will be in added to the Contract Price.

Changes in Agreement: This Agreement, the work description and specifications, and the Contract Price shall not be modified except by written change order. A change order may be formalized by email correspondence between Contractor and Owner(s).

Work Schedule: By signing this agreement, you agree that all the listed materials are correct: color, glass type (Low-E, etc.), finish, and swing or slide direction. Contractor agrees to perform the Work in a good and workmanlike manner with reasonable dispatch in accordance with the specifications contained herein. The Contractor is responsible for establishing scheduling and sequencing of the work to be performed. Reasonable delays include, but are not limited to, weather, non-delivery, discontinuance, default in shipment by a supplier in whole or in part, loss in transit, labor strikes, labor shortages, lockouts or other causes beyond Contractor's control.

Materials: Except as otherwise set forth in a writing between Owner(s) and Contractor, Contractor will provide necessary materials to complete the work per the work description and specifications. Contractor cannot guarantee that upon removal, exterior and/or interior trim will be salvageable. Unless replacement of trim is written in this agreement, trim will be replaced on a time and materials basis and billed to the customer on final invoice.

Contractor Responsibilities: Contractor agrees to perform the work description and specifications as outlined in the Estimate and any agreed written changes incorporated into this Agreement. This includes: buck replacement (if required), caulking, shimming, stucco work, permitting. Excluded: Replacing broken sills, rotten wood, damaged trim, flooring and PAINTING.

Owner Responsibilities: Owner(s) warrants to Contractor that he/she/they is the legal owner of the property. Owner(s) agrees to provide to Contractor electric power and water for construction purposes at no charge to Contractor. Owner(s) acknowledges that the removal of permanently attached building materials often disturbs and vibrates the existing property. The noise, debris, and vibration generated from the work may cause inconvenience to Owner(s) and changes to Owner(s) property including but not limited to: dust, disturbance to shrubbery and lawns, small divots or ruts in yard. As a precaution, Owner(s) shall remove from walls or ceilings items such as, but not limited to, any breakables. Owner(s) shall remove or move at least 24" away from work area any outdoor furniture, grills, etc. Owner is responsible for removing and reinstalling: blinds, curtains, motorized blinds, plantation shutters alarm system contacts or furniture. Contractor shall not be responsible for any of the aforementioned property damage or for any inconvenience experienced by Owner(s) as a normal consequence of the work.

Final Inspection: It is the responsibility of the homeowner to be present or have someone present in place of the owner at the time of the final inspection. If this responsibility falls on Contractor, a fee of \$150 will be applied to the final invoice for a Contractor Representative to be present

Material Warranty: Contractor does not warrant the materials used to complete the Work. Material warranty shall be limited to manufacturer's warranty of materials according to the terms and conditions of said manufacturer warranty. Customers are required to report any warranty items or defects within 10 days of the completion of installation.

Limitation of Liability: Owner(s) acknowledges that at no time shall Contractor's liability exceed the total amount charged for the work performed under this Agreement. Contractor shall not be liable for any defects which are characteristic to the particular materials such as cracks, splits, and shrinkage or warping of wood or lumber, etc.

Contractor Insurance: Contractor agrees to maintain liability insurance covering personal injury in an amount not less than \$500,000 and insurance covering property damage caused by its work in an amount not less than \$500,000.

We are committed to providing you with expert workmanship using quality materials from our suppliers.

Your complete satisfaction is our goal. Please let us know if there is anything in our work that we can improve for you.

Owner Signature: _____

Date: _____

H & M Impact Window and Door, Inc.
2700 Industrial Ave 3 St
Fort Pierce, FL 34946
(861) 221-0666



H & M Impact Window and Door, Inc
1507 Faber Court
Fort Pierce, FL 34949
ph: 561-221-0666

CUSTOMER
QUOTE #
208027

Bill To	Ship To	Project Name
	H&M Impact Window & Door	William Bierlin
	2700 Industrial Ave 3 st	Quote Name
		William Bierlin
	Fort Pierce, FL 34946	Quote Creation Date
		1/12/2024
Job Notes:		

1-1	Description	Unit Price	Quantity	Extension
		\$5,472.80	1	\$5,472.80

9200 Series Double Sliding Door XO 85 x 52

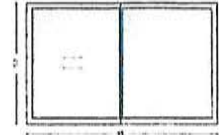
Frame: Custom, Width = 85, Height = 52, Bronze

Glass: 3/16 HS/ 090 Butacite Int/ 3/16 HS, NOA Glass = B, Clear, Mono LoE 62/27, Interlayer = Clear, 7/16"

Performance: Required DP = +50 / -50, Calculated DP = +56.7 / -70

Type: Sill Type = 2-1/4", Door/Track = 2 Panel / 2 Track, Standard Screen

Hardware: Mortise Lock,



2-1	Description	Unit Price	Quantity	Extension
		\$5,888.35	1	\$5,888.35

9200 Series Double Sliding Door XX 73 1/2 x 52

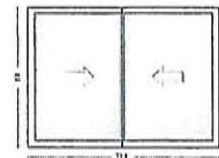
Frame: Custom, Width = 73.5, Height = 52, Bronze

Glass: 3/16 HS/ 090 Butacite Int/ 3/16 HS, NOA Glass = B, Clear, Mono LoE 62/27, Interlayer = Clear, 7/16"

Performance: Required DP = +50 / -50, Calculated DP = +56.7 / -70

Type: Sill Type = 2-1/4", Door Stacking = Standard, Door/Track = 2 Panel / 2 Track, Standard Screen

Hardware: Mortise Lock,



3-1	Description	Unit Price	Quantity	Extension
		\$5,472.80	1	\$5,472.80

9200 Series Double Sliding Door OX 89 1/4 x 52

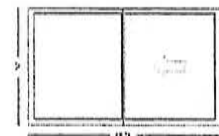
Frame: Custom, Width = 89.25, Height = 52, Bronze

Glass: 3/16 HS/ 090 Butacite Int/ 3/16 HS, NOA Glass = B, Clear, Mono LoE 62/27, Interlayer = Clear, 7/16"

Performance: Required DP = +50 / -50, Calculated DP = +56.7 / -70

Type: Sill Type = 2-1/4", Door/Track = 2 Panel / 2 Track, Standard Screen

Hardware: Mortise Lock,



Order Comments:

Thank you for the opportunity to quote your project.

Submitted by: _____

Date: _____

Approved by: _____

Date: _____

SubTotal	\$16,833.95
Freight	\$0.00
Tax	\$0.00
Labor	\$0.00
GrandTotal	\$16,833.95
Deposit	(\$0.00)
Balance	\$16,833.95



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

HAYNES, BENJAMIN AARON

H&M IMPACT WINDOW AND DOOR, INC
2700 INDUSTRIAL AVE 3 UNIT 1
FORT PIERCE FL 34946

LICENSE NUMBER: CGC1533258

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com

ISSUED: 11/02/2023

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



pdf

**H & M Impact Window and
Door, Inc-Document-**
184 KB

Board Approval

Window Installation in lanai of 12-307

Leonora Wildfeir <leewildfeir@me.com>

Mon 2/5/2024 12:32 PM

To: Bonnie Guenther <manager@conquistadorliving.com>

Cc: Carol Hoyt <choytie@gmail.com>; Dave Palella <davepalella@gmail.com>; Robert Schappert <RHSchappert@gmail.com>; Pat Stuart <patstuart1@bellsouth.net>; William (Bud) Bierlein <bierleinw@bellsouth.net>

Bonnie,

We, the Board of Directors of Building 12 being, Dave Palella, President, Rob Schappert, Vice President, Carol Hoyt, Treasurer, Pat Stuart, Director and me, Lee Wildfeir, Secretary, are aware of Bill Bierlein's request to install new windows in his lanai (Unit 307) and unanimously approve of the installation.

Please let us know if there is anything else that you need from us.

Lee Wildfeir

On behalf of the BOD of Building XII.

Sent from my iPad

H : M
Custom
Builders
and
H : M
Impact
Window +
Door

FEIN # 87-4189333



CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YYYY)
10/17/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Risk Transfer Insurance Agency, LLC 47 E. Robinson Street Suite 200 Orlando, FL 32801	CONTACT NAME: Taylor Gray PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL: taylor@congruityhr.com ADDRESS:																					
INSURED Congruity HR, LLC 100 North Cherry Street Suite 520 Winston Salem, NC 27101	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr> <tr> <td colspan="2">INSURER A :Service American Indemnity Company</td><td>39152</td></tr> <tr> <td colspan="2">INSURER B :</td><td></td></tr> <tr> <td colspan="2">INSURER C :</td><td></td></tr> <tr> <td colspan="2">INSURER D :</td><td></td></tr> <tr> <td colspan="2">INSURER E :</td><td></td></tr> <tr> <td colspan="2">INSURER F :</td><td></td></tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A :Service American Indemnity Company		39152	INSURER B :			INSURER C :			INSURER D :			INSURER E :			INSURER F :		
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INSURER D :																						
INSURER E :																						
INSURER F :																						

COVERAGES **CERTIFICATE NUMBER:YMAUPAA** **REVISION NUMBER:**

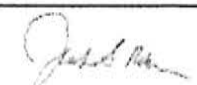
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	RT23MWC7000045504 RT23MWC7000255301	07/30/2023	07/30/2024	X PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 \$ \$ \$ \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Workers Compensation coverage is provided for only those employees leased to, but not subcontractors of H&M Impact Window and Door, Inc. (Effective 10/8/23)

CERTIFICATE HOLDER

CANCELLATION

H & M Impact Window and Door Inc 2700 Industrial Avenue 3, Unit 1 Fort Pierce, FL 34946-8663	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> 
--	--

Sent 2/8/24

Received 2/7/24
BG

Conquistador

APPLICATION FOR ARCHITECTURAL REVIEW

Please deliver or mail this form with any related information to:

Conquistador Homeowners' Association, Inc.
1800 SE St. Lucie Blvd., Clubhouse
Stuart, FL 34996

Attn: Architectural Review Committee

**PLEASE DO NOT FAX OR
EMAIL APPLICATION TO
ARCHITECTURAL
REVIEW COMMITTEE**

Name of Homeowner / Applicant: BUILDING 1X

Project Property Address: 1800 SE ST. LUCIE BLVD

Phone: 772-283-2363 Email: MANAGER@CONQUISTADORLIVING.COM

Is this a resubmittal? ☐ Yes ☐ No Is this an emergency requiring expedited handling? ☐ Yes ☐ No

Approval is requested for the following modification(s) / alteration(s) to the above property. Type in or print out and fill in the information relating to your project. Please note in the Additional Information section if this request is for an identical replacement / repair / or reconditioning of an existing item:

- | | | |
|---|---|--|
| <input type="checkbox"/> Addition / Alteration | <input type="checkbox"/> Generator | <input type="checkbox"/> Propane Tank |
| <input type="checkbox"/> Decorative Shutters | <input type="checkbox"/> Hurricane Shutters | <input type="checkbox"/> Roof |
| <input checked="" type="checkbox"/> Driveway / SIDEWALK | <input type="checkbox"/> Lamp Post / Fixture | <input type="checkbox"/> Screen Room / Enclosure |
| <input type="checkbox"/> Exterior Door | <input type="checkbox"/> Mailbox/Mailbox Post Color | <input type="checkbox"/> Siding / Stucco |
| <input type="checkbox"/> Fences | <input type="checkbox"/> Paint* | <input type="checkbox"/> Soffits / Facia |
| <input type="checkbox"/> Garage Door | <input type="checkbox"/> Patio / Deck | <input type="checkbox"/> Water Features |
| <input type="checkbox"/> Garage Screen Door | <input type="checkbox"/> Pool / Spa Equipment | <input type="checkbox"/> Window Replacement |
| <input type="checkbox"/> Solar - Hot Water | <input type="checkbox"/> Solar - Pool Heating | <input type="checkbox"/> Solar - Photovoltaic |

* Paint Specifics - Please specify colors by code numbers if using the Approved Exterior Colors for All of Conquistador if you are using the approved color palette. If you are not using the approved color palette the applicant must submit color samples for the following:

House Color: _____ Manufacturer: _____
Trim Color: _____ Manufacturer: _____
Garage Door Color: _____ Manufacturer: _____
Front Door Color: _____ Manufacturer: _____
Other: _____ Manufacturer: _____

Please check and attach appropriate items as necessary:

- | | |
|---|---|
| <input type="checkbox"/> Initial Plan(s) / Specification(s) | <input type="checkbox"/> Revised Plan(s) / Specification(s) |
| <input type="checkbox"/> Drainage Surface Water Plan | <input type="checkbox"/> Grading Plan |
| <input type="checkbox"/> Color Sample(s) | <input type="checkbox"/> Texture Sample(s) |

Additional Information:

Anticipated Commencement Date: 2/27/24 Anticipated Completion Date: 4/1/24

By signing this Application, the applicant acknowledges that approval by the Architectural Control Board is subject to the following:

1. The applicant agrees that no work shall commence prior to receiving written approvals by the Architectural Control Board.
2. The applicant shall obtain the necessary building permits from the Martin County Building Department. Items requiring building permits can be found at <https://www.martin.fl.us/martin-county-services/do-i-need-permit>
3. The applicant shall use contractors / subcontractors registered with the Martin County Building Department.
4. The applicant shall comply with all provisions of the Conquistador Homeowners' Association, Inc. governing documents as well as all other governing documents.
5. The activities associated with this application shall not infringe on the property rights of others, and shall take place Monday – Friday, 8 AM – 5 PM.
6. Access to the area(s) of construction shall be allowed through the applicants' property. If access to a neighboring property is required, the applicant shall receive written permission from neighboring property owner. The applicant shall be responsible for any repairs to damage caused during the project to neighboring properties or common areas.
7. The applicant agrees not to deviate from the intent or substance of the approved Application. Should a deviation occur, the applicant agrees to rectify the deviation upon notification from the Architectural Control Board.
8. Remodeling debris, including, but not limited to cabinets, doors, rugs, appliances, or other large materials, must be disposed of privately by the owner at his/her expense through a private refuse company or by the contractor performing the work. If a dumpster is required for your project to dispose of debris it is requested that the dumpster be onsite no more than 30 days.

Homeowner / Applicant Signature: Donna Sikora, Pres. Date: 2/7/24

Conquistador Homeowners' Association, Inc. Use Only

Date Received by Architectural Review Committee (ARC):

Recommended by ARC

Date:

2/20/24

By:

Renee Drathmey

Recommended by ARC with Conditions Date:

By:

Not Recommended by ARC

Date:

By:

Explanation(s) / Comment(s)

Date Received by Architectural Control Board (ACB)

Approved by ACB

Date:

2/20/24

By:

Renee Drathmey

Approved by ACB with Conditions

Date:

By:

Disapproved by ACB

Date:

By:

Explanation(s) / Comment(s)



Address
8371 MCALLISTER WAY
WEST PALM BEACH, FL
33411

Telephone
561-791-4482 Office
561-791-4482 Office

Company email
SUNSHINESERVICESINC@YAHOO.COM
Salesperson email
SUNSHINESERVICESINC@YAHOO.COM

PROPOSAL 01-31-2024-#783-1 / 2/14/2024

Project Proposal

Dear Bonnie Guenther, LCAM,

Thank you for the opportunity to provide you with a proposal and detailed scope of work for your project.

Sunshine Services Unlimited, Inc. is a professional asphalt paving contractor serving commercial and residential clients throughout South Florida. Our West Palm Beach asphalt paving company is family-owned and operated and has been in business since 1962.

You can count on us for all of your parking lot and roadway projects. Whether you are in need of asphalt paving services for new construction or to repair or maintain an existing roadway, we are here to assist you. If you hire us for your asphalt paving or asphalt sealcoating project, you can expect high quality work completed in a timely manner, excellent value for your money and customer service that is unmatched in our industry. Our West Palm Beach asphalt paving company offers free estimates and free consultations and we guarantee our work. We are fully licensed, bonded and insured for your protection.

Per your request, we propose to supply the following to complete the indicated job: Labor, Materials, Equipment

Exclusions: Testing, Towing, Permits, 3rd Party Inspections, Stake-Out, Removal Or Relocation Of Utilities, Any Other Items As Listed On The Terms And Conditions Page.

Please review the proposal and feel free to call with any questions.

CLIENT

Conquistador Homeowners Association
Bonnie Guenther, LCAM

CONTACT

772-283-2363
manager@conquistadorliving.com

JOB NAME

Conquistador Condo Bldg. 9 (Sidewalk Repairs)

ADDRESS

1800 SE St Lucie Blvd Bldg. 9, Stuart, FL, 34996



Proposal No.: 01-31-2024-#783-1
Date: 2/14/2024
Prepared for: Conquistador Homeowners Association
Job name: Conquistador Condo Bldg. 9 (Sidewalk Repairs)

2

Proposal

STRAIGHTENING OF SIDEWALK IN FRONT IF UNIT 103 (R7)

Price: \$854.00

Remove and Replace Up To 54 SF of Concrete Sidewalk - 18'L x 3'W x 4"D - Straightening of Sidewalk

1. Saw cut, jack hammer and remove concrete sidewalk.
2. Saw cut and remove any surface roots as required prior to new sidewalk install.
3. Re-compact the sub base material in effected area.
4. Install forms as required for sidewalk to match existing.
5. Install 6" x 6" x 6" wire mesh.
6. Pour new 4,000psi concrete into forms.
7. Apply a rough broom finish to match existing sidewalk. New concrete will vary in texture and color compared to existing concrete.
8. Tool control joints spaced 5' on center, 1" deep.
9. Return next day, remove forms and haul away any related debris.
10. Area should remain closed for a period of 3 - 5 days to allow the concrete to cure.
11. This contractor will not be held responsible for any harm caused to trees who's roots were cut as part of this project.
12. This contractor will not be held responsible for damage to sod, sprinklers or underground utilities in work areas.



Proposal No.: 01-31-2024-#783-1
Date: 2/14/2024
Prepared for: Conquistador Homeowners Association
Job name: Conquistador Condo Bldg. 9 (Sidewalk Repairs)

3

OPTION #3 COMPLETE SIDEWALK REPLACEMENT 300'LX3'W'4"D

Price: \$13,300.00

Remove and Replace Up To 950SF of Concrete Sidewalk - 316'L x 3'W x 4"D - Includes all areas per field sketch #001A dated 2/12/2024

1. Saw cut, jack hammer and remove concrete sidewalk.
2. Saw cut and remove any surface roots as required prior to new sidewalk install.
3. Re-compact the sub base material in effected area.
4. Install forms as required for sidewalk to match existing.
5. Install 6" x 6"x 6" wire mesh.
6. Pour new 4,000psi concrete into forms.
7. Apply a rough broom finish to match existing sidewalk. New concrete will vary in texture and color compared to existing concrete.
8. Tool control joints spaced 5' on center, 1" deep.
9. 2% grade on the cross and running slopes to be maintained.
10. Return next day, remove forms and haul away any related debris.
11. Area should remain closed for a period of 3 - 5 days to allow the concrete to cure.
12. Furnish and install (1) 2-1/4 in. x 6 ft. Slim Channel Drain at location as indicated on sketch #001A dated 2/12/2024.
13. This contractor will not be held responsible for any harm caused to trees who's roots were cut as part of this project.
14. This contractor will not be held responsible for damage to sod, sprinklers or underground utilities in work areas.
15. This contractor will not remove any shrubs or plantings in areas adjacent to work area.
16. This work does not include installation of two small drain boxes.

IF A PERMIT IS REQUESTED, THE FEE FOR THE PERMIT WILL BE 3% - 5% OF THE COST OF THE CONTRACT.

TOTAL PRICE OF THIS PROPOSAL AS PRESENTED:

\$14,154.00



Proposal No.: 01-31-2024-#783-1

Date: 2/14/2024

Prepared for: Conquistador Homeowners Association

Job name: Conquistador Condo Bldg. 9 (Sidewalk Repairs)

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Agreement:

The Unit Rates applicable to the categories of work to be performed pursuant to this Agreement are based on the material costs and published indexes as of 03/01/2023. Purchaser acknowledges that if the above-listed items increase by the date all work under the contract is completed, the Unit Rates applicable to the categories of work to be performed under the Proposal shall be adjusted. The adjusted Unit Rates shall be committed and paid by the purchaser as though a written change order were approved and signed by both parties.

Sunshine Services Unlimited, Inc. U-20248 - 09-3B-16306R - CP-5974 proposes to furnish material and labor to perform the work outlined herein for the sum of:

\$14,154.00, FOURTEEN THOUSAND, ONE HUNDRED FIFTY-FOUR DOLLARS AND ZERO CENTS

Payment is to be made as follows:

- 50% Due Upon Acceptance of Contract
- 40% Due Upon Completion of Work as Detailed in this Contract
- 10% Due Upon Close Out/Completion of Punch List Items

This proposal is valid for thirty (30) days from the date written above. The proposal is subject to the terms and conditions enclosed, attached, and/or on the backside of the proposal.

This proposal contains confidential information belonging to the sender, which is legally privileged. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or the taking of any action in reliance on the contents of this proposal is strictly prohibited. If you have received this proposal in error, please immediately notify us by telephone to arrange for the return of the original documents to us.

Sincerely,

Sunshine Services Unlimited, Inc., Sales
sunshineservicesinc@yahoo.com
Office: 561-791-4482

Accepted: The above-proposed terms and conditions, including price and payment terms, are satisfactory and hereby accepted. **Sunshine Services Unlimited, Inc. U-20248 - 09-3B-16306R - CP-5974** is hereby authorized to proceed with the work specified.

Purchaser: B. Guenther Title: Manager
Printed Name: Bonnie Guenther Date: 2/14/23



Proposal No.: 01-31-2024-#783-1

Date: 2/14/2024

Prepared for: Conquistador Homeowners Association

Job name: Conquistador Condo Bldg. 9 (Sidewalk Repairs)

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Terms and Conditions:

NOTE: Unless stated otherwise we exclude: permits, permit fees, survey, layout, testing, expediting, M.O.T., engineering as-builts and LBR-40.

Sunshine Services Unlimited Inc will not be responsible:

- Any markings from any vehicle tires during or after project from tenants, service vehicles, and pedestrians are not Sunshine Services' responsibility. New asphalt and sealer will scuff and track until fully cured.
- If any sealer splattered by rain, sprinkler water, or any fine mist of sealer on any part of property.
- For any hairline cracking in concrete, reflective cracking in asphalt and slippage cracking.
- Any grass that grows through asphalt. Any Gasoline/oil spills will soften and dissolve the asphalt.
- If anyone other than Sunshine Services Unlimited Employees enters and damage is done to area, you will be charged for any said repairs.
- Always keep the area worked on closed for at least 1 day after work is completed.
- For any damage to underground utilities or irrigation systems when not properly marked by client.
- Any removal of construction debris other than debris related directly to the scope of work.
- When paving, we make every reasonable attempt to accommodate proper drainage, however, we cannot guarantee that 100% of all standing water will be eliminated due to pre-existing sub-surface conditions.
- Sunshine Services Unlimited will not be responsible for "Bird Baths" on the project when the design grade is less than 1.0% fall.
- Sunshine Services Unlimited will not be responsible for any damage caused by vibratory rollers required to achieve the required densities on the project. (i.e. broken windows, cracked foundations, structures, etc.)
- If the applicable Building Department requires **additional work** other than described, those costs are not included.
- Sunshine Services Unlimited will not be responsible for damage to grass, sod, irrigation or any other underground utilities. Excavated materials will be left in the islands/landscaped areas.

Terms and Conditions:

- Client has the right to cancel contract within 5 Days from signing and paid deposit, in order for said deposit to be returned.
- Work area will be barricaded.
- All cars must be removed prior to arrival. Any delay or downtime due to blocked access of any area where work is to be performed; there will be a charge of \$150.00/hour.
- All sprinklers must be turned off 24 hours prior and 48 hours after commencement of work.
- This contract/proposal is subject to review if not accepted within thirty calendar days. If contract is not executed within 60 days of acceptance, contract pricing will be subject to review for possible material price increases.
- Excessive cleaning, dirt or debris removal will result in additional costs to contract total.
- Any risers needed for underground utilities will be billed in addition to the contract amount.
- As the original base was designed and previously installed by others, Sunshine Services Unlimited cannot guarantee new asphalt surfacing against possible further cracking, settlement, drainage problems, minor bird baths or root heave by adjacent plant material. We do, however, guarantee our own work against all defects in materials and workmanship for a period of one year.
- **NOTE – Due to deficiencies in asphalt grades and ADA Compliance there will be additional fees of \$165.00/ton on place over the theoretical yield.**
- **Should Sunshine Services Unlimited be paving on lime rock installed and graded by others, additional fees of \$165.00/ton apply placed over the theoretical yield.**
- **Price Includes:** All labor, machinery and materials.
- Final measurement prevails. Note: if quantities are provided by client and plans are not available for review prior to



Proposal No.: 01-31-2024-#783-1

Date: 2/14/2024

Prepared for: Conquistador Homeowners Association

Job name: Conquistador Condo Bldg. 9 (Sidewalk Repairs)

6

submitting quote, final payment to be based upon actual quantities installed. (final field measurements upon completions)

- **Price Does Not Include:** Additional work beyond the scope of work listed above, survey fees, permit fees and execution, densities, compaction tests, engineering fees, concrete ramps, bonds, rpm's, ADA FDOT detectable tiles, signage etc.
- Permit expediting fee is billed at \$695.00
- All testing, engineering, inspections, layouts, surveying, and fees to be supplied by others.
- No corrective work will take place prior to payment of the contractual 90% funds.
- Sunshine Services Unlimited's bid was based on one mobilization for the asphalt paving operations. Each additional mobilization to be billed at \$4,500.00 each (Unless specified otherwise),

Payments Must Be Made As Follows:

- **50% Due Upon Acceptance of Contract, 40% Upon Completion of Work as Detailed in Contract, 10% Due at Close Out of Final Permit & Inspection by Governing Body and/or Completion of Punch List Items**
- **All monies not paid when due shall bear interest at the prime rate +10% per annum allowed by law on the project.**

Owner Representation:

- Person signing contract represents and warrants that they are the record or have the authority to bind the record owner to the contract. Such representation is made with the intent that Sunshine Services Unlimited, Inc., relies on it.
- No work will be scheduled without a signed proposal and a deposit.

Legal Dispute:

- In the event of legal dispute, the venue shall be Palm Beach County and prevailing party shall get court costs and legal expenses.

Warranty:

- Warranty does not include reflective cracking from existing asphalt or pre-existing sub-surface conditions. Materials and workmanship guaranteed one year from date of completion of work. No warranties will be honored unless payment is paid in full.

CONQUISTADOR CONDOMINIUM IX

A 3 STORY CONDOMINIUM APARTMENT BUILDING
SECTION II, TOWNSHIP 38 SOUTH, RANGE 41 EAST, MARTIN COUNTY FLA.

Strengthening Section

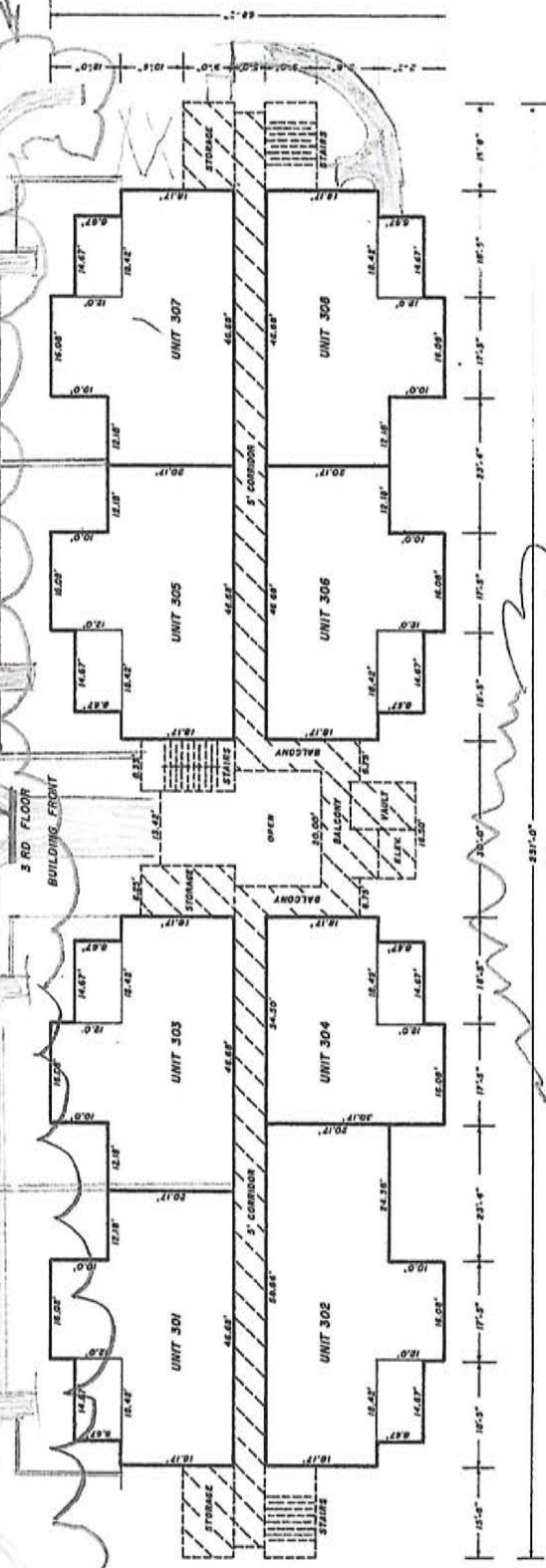
Field sketch #001A
12 FEB 2024
SIDE WALK
N.T.S.

APPROX 300 ft.
+ the entrance

REN.

U-drain

N



Building #9 Sidewalks
Replacement

1800 SE SAINT LUCIE BLVD.
STUART, FLORIDA
34996
"CONQUISTADOR"

LEGEND

CONDOMINIUM UNITS ENCLOSED THUS
COMMON ELEMENTS SHOWN BY BROKEN LINES THUS

Close X

Pro Series 5 in. x 40 in. Channel Drain Kit with Metal Grate

by NDS



Related Videos & 360° View



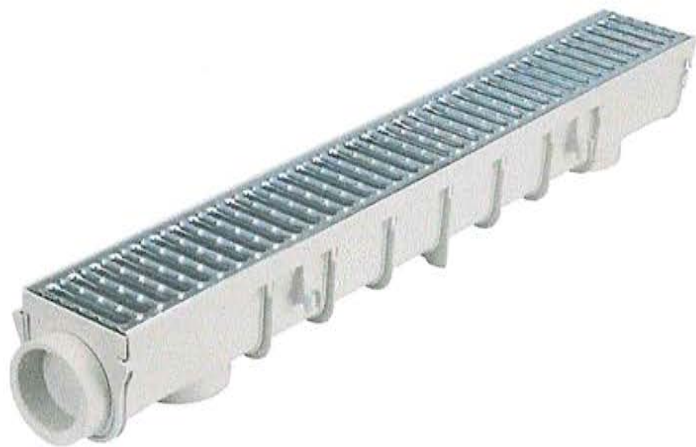
Product Images



Tap and Hold to Zoom

Live Chat

Feedback



Pro Series 5 in. x 40 in. Channel Drain Kit with Metal Grate

by NDS

Related Videos & 360° View



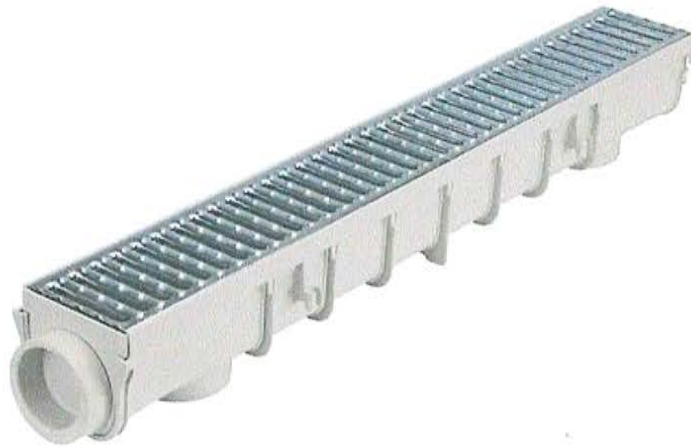
Product Images

Tap and Hold to Zoom

Live Chat

Feedback

9 in
Vell.



Pro Series 5 in. x 40 in. Channel Drain Kit with Metal Grate

by **NDS**

Related Videos & 360° View



Product Images

Tap and Hold to Zoom

Live Chat

Feedback



Pro Series 5 in. x 40 in. Channel Drain Kit with Metal Grate

by **NDS**

Related Videos & 360° View



Product Images

Tap and Hold to Zoom



Pro Series 5 in. x 40 in. Channel Drain Kit with Metal Grate

by **NDS**

Related Videos & 360° View



Product Images

Tap and Hold to Zoom

Live Chat

Feedback

Minutes of Site Meeting

Date: 12 Feb 2024
Time: 1:00 PM
Place: Building #9-108 Sunroom

Present: Alex Garcia (Sunshine Services Unlimited) (SSU)

Bonnie Guenther (Manager Conquistador)
Donna Sikora (President of Building #9)
Mike Brady (Condo Owner 9-108)

Subject: Pre award Meeting Building #9 Front Walkway

The following items were noted:

1. Work will be as per option #3, total replacement. Option 3 includes straightening of the R7 location.
2. Site walk today done with SSU of the proposed construction site area.
3. Reviewed method of demolition and replacement. Site equipment proposed would be a rubber track Kubota or equivalent. Starting at the north end. Estimate 5 days total.
~~Contractor would also remove the plants that are in the way for the concrete formwork as per site discussion.~~ Noted sprinkler system in the area and caution must be taken. It might require some 3" dia. PVC pipe under the Concrete for the sprinkler system.
4. Permit will be required. MB will forward an up-to-date sketch #001A dated 12Feb24 by end of day.
5. Concrete will be 4000 psi with 6x6x6 wire mesh and not 6x6xW1.4 10 gauge.
6. Refer to sketch #001 dated 16Jan24.
7. 2% grade required to the side. (no pooling of water)
8. Maximum slump of 3".
9. Sawcut – 5ft length 1" deep

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Sunshine Services Unlimited, Inc.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☒ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►
Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

8371 McAllister Way

6 City, state, and ZIP code

West Palm Beach, FL 33411

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

5 9 - 1 5 9 4 9 8 3

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

Date ► 2/21/2019

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/08/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Brown & Brown of Florida, Inc. 1661 Worthington Rd Ste 175 West Palm Beach FL 33409		CONTACT NAME: Trevor Glisson PHONE (A/C, No, Ext): (561) 473-6089 FAX (A/C, No): (561) 686-2313 E-MAIL ADDRESS: trevor.glisson@bbrown.com																					
INSURED Sunshine Services Unlimited, Inc. 8371 McAllister Way West Palm Beach FL 33411		<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>Continental Casualty Company</td><td>20443</td></tr><tr><td>INSURER B:</td><td>Valley Forge Insurance Company</td><td>20508</td></tr><tr><td>INSURER C:</td><td>FFVA Mutual Insurance Co.</td><td>10385</td></tr><tr><td>INSURER D:</td><td>Federal Insurance Company</td><td>20281</td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Continental Casualty Company	20443	INSURER B:	Valley Forge Insurance Company	20508	INSURER C:	FFVA Mutual Insurance Co.	10385	INSURER D:	Federal Insurance Company	20281	INSURER E:			INSURER F:		
INSURER(S) AFFORDING COVERAGE		NAIC #																					
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INSURER C:	FFVA Mutual Insurance Co.	10385																					
INSURER D:	Federal Insurance Company	20281																					
INSURER E:																							
INSURER F:																							

COVERAGES**CERTIFICATE NUMBER:** 23-24 Master COI**REVISION NUMBER:**


THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			7012333349	03/15/2023	03/15/2024	EACH OCCURRENCE	\$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		DAMAGE TO RENTED PREMISES (Ea occurrence)				\$ 100,000	
			MED EXP (Any one person)				\$ 25,000	
			PERSONAL & ADV INJURY				\$ 1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:							\$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY			7012333352	03/15/2023	03/15/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO		BODILY INJURY (Per person)				\$	
	<input type="checkbox"/> OWNED AUTOS ONLY	<input type="checkbox"/> SCHEDULED AUTOS	BODILY INJURY (Per accident)				\$	
	<input type="checkbox"/> HIRED AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY	PROPERTY DAMAGE (Per accident)				\$	
						PIP	\$ \$10,000	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB			7012333383	03/15/2023	03/15/2024	EACH OCCURRENCE	\$ 1,000,000
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE	AGGREGATE				\$ 1,000,000	
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000						\$	
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC840-0034749-2023A	03/01/2023	03/01/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N <input type="checkbox"/> N <input checked="" type="checkbox"/>					E.L. EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
D	Inland Marine			45473246	03/15/2023	03/15/2024	Leased/Rented	\$150,000
			Limit				\$1,537,018	
			Deductible				\$1,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: Conquistador HOA and Conquistador Condo I-XII as Additionally insured. Side walk replacement in 10 locations and other sidewalk work at 1800 SE St. Lucie Blvd, Stuart, FL 34996.

CERTIFICATE HOLDER**CANCELLATION**

Conquistador Homeowners Association, Inc 1800 SE St. Lucie Blvd Stuart FL 34996	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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Martin County Florida

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Licensee Detail

License Type: MC - PAVING COMMERCIAL License Number: MCP5974
License Expiration Date: 07/01/2024
Business Name: SUNSHINE SERVICES UNLIMITED INC
Address: 8371 MCALLISTER WAY
BEALE, DAVID M
W PALM BEACH FL 33411
M17H14462
sunshineservicesunc@yahoo.com

Related Records

Public Documents

Martin County Florida
Your County. Your Community.



Search



12:38 PM
11/11/2024

DBPR - DOOLEY, JEREMIAH C

myfloridalicense.com/LicenseDetail.asp?SID=9339AA782BA1E0DBF8081887853165A0

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48 - Horizontal Mail...

CenterState Bank S...

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Florida

dbpr

Department of Business & Professional Regulation

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ABAT Delinquent Invoice & Activity List Search

LICENSEE DETAILS

12:20:54 PM 2/12/2024

Licensee Information

Name

DOOLEY, JEREMIAH CHRISTOPHER (Primary Name)

Main Address

SUNSHINE SERVICES, UNLIMITED, INC. (DBA Name)

County

18097 41ST RD N

License Location

LOXAHATCHEE, Florida 33470

County

PALM BEACH

License Information

License Type

Certified General Contractor

Rank

Cert General

License Number

CGC1531629

Status

Current/Active

Licensure Date

02/16/2022

Expires

02/31/2024

Special Qualifications

Construction Business

Qualification Effective

02/16/2022

Alternate Names

View Related License Information

View License Complaint

2021 Glen Stone Road, Tallahassee FL 32306 Email: Customer Contact Center Customer Contact Center 850-437-1335

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Under Florida law, email addresses are public records. If you do not want your email address released in response to a public records request, do not send emails marked as confidential. For more information, please contact the Office of Information Practices at 850-437-1335. If you have any questions, please contact 850-437-1335. Florida Department of Business & Professional Regulation

8377

Search

12:23 PM 2/12/2024

Conquistador

APPLICATION FOR ARCHITECTURAL REVIEW

Please deliver or mail this form with any related information to:

Conquistador Homeowners' Association, Inc.
1800 SE St. Lucie Blvd., Clubhouse
Stuart, FL 34996

Attn. Architectural Review Committee

**PLEASE DO NOT FAX OR
EMAIL APPLICATION TO
ARCHITECTURAL
REVIEW COMMITTEE**

Name of Homeowner / Applicant: Julie Fall

Project Property Address: 3180 SE Gran Via Way

Phone: 603.781.1226 Email: jfallnh@comcast.net

Is this a resubmittal? ☐ Yes ☒ No Is this an emergency requiring expedited handling? ☐ Yes ☐ No

Approval is requested for the following modification(s) / alteration(s) to the above property. Type in or print out and fill in the information relating to your project. Please note in the Additional Information section if this request is for an identical replacement / repair / or reconditioning of an existing item:

- | | | |
|--|---|--|
| <input type="checkbox"/> Addition / Alteration | <input type="checkbox"/> Generator | <input type="checkbox"/> Propane Tank |
| <input type="checkbox"/> Decorative Shutters | <input type="checkbox"/> Hurricane Shutters | <input type="checkbox"/> Roof |
| <input checked="" type="checkbox"/> Driveway | <input type="checkbox"/> Lamp Post / Fixture | <input type="checkbox"/> Screen Room / Enclosure |
| <input type="checkbox"/> Exterior Door | <input type="checkbox"/> Mailbox/Mailbox Post Color | <input type="checkbox"/> Siding / Stucco |
| <input type="checkbox"/> Fences | <input type="checkbox"/> Paint* | <input type="checkbox"/> Soffits / Facia |
| <input type="checkbox"/> Garage Door | <input type="checkbox"/> Patio / Deck | <input type="checkbox"/> Water Features |
| <input type="checkbox"/> Garage Screen Door | <input type="checkbox"/> Pool / Spa Equipment | <input type="checkbox"/> Window Replacement |
| <input type="checkbox"/> Solar - Hot Water | <input type="checkbox"/> Solar - Pool Heating | <input type="checkbox"/> Solar - Photovoltaic |

* Paint Specifics - Please specify colors by code numbers if using the Approved Exterior Colors for All of Conquistador if you are using the approved color palette. If you are not using the approved color palette the applicant must submit color samples for the following:

House Color: _____ Manufacturer: _____

Trim Color: _____ Manufacturer: _____

Garage Door Color: _____ Manufacturer: _____

Front Door Color: _____ Manufacturer: _____

Other: Moonstone Manufacturer: Valspar

and attach appropriate items as necessary:

- | | |
|---|---|
| <input type="checkbox"/> / Specification(s) | <input type="checkbox"/> Revised Plan(s) / Specification(s) |
| <input type="checkbox"/> Surface Water Plan | <input type="checkbox"/> Grading Plan |
| <input type="checkbox"/> (s) | <input type="checkbox"/> Texture Sample(s) |



Moonstone

Additional Information:

Similar to Peggy's doing it myself

Anticipated Commencement Date: ASAP

Anticipated Completion Date: ASAP

By signing this Application, the applicant acknowledges that approval by the Architectural Control Board is subject to the following:

1. The applicant agrees that no work shall commence prior to receiving written approvals by the Architectural Control Board.
2. The applicant shall obtain the necessary building permits from the Martin County Building Department. Items requiring building permits can be found at <https://www.martin.fl.us/martin-county-services/do-i-need-permit>
3. The applicant shall use contractors / subcontractors registered with the Martin County Building Department.
4. The applicant shall comply with all provisions of the Conquistador Homeowners' Association, Inc. governing documents as well as all other governing documents.
5. The activities associated with this application shall not infringe on the property rights of others, and shall take place Monday – Friday, 8 AM – 5 PM.
6. Access to the area(s) of construction shall be allowed through the applicants' property. If access to a neighboring property is required, the applicant shall receive written permission from neighboring property owner. The applicant shall be responsible for any repairs to damage caused during the project to neighboring properties or common areas.
7. The applicant agrees not to deviate from the intent or substance of the approved Application. Should a deviation occur, the applicant agrees to rectify the deviation upon notification from the Architectural Control Board.
8. Remodeling debris, including, but not limited to cabinets, doors, rugs, appliances, or other large materials, must be disposed of privately by the owner at his/her expense through a private refuse company or by the contractor performing the work. If a dumpster is required for your project to dispose of debris it is requested that the dumpster be onsite no more than 30 days.

Homeowner / Applicant Signature: 

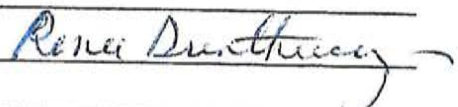
Date: 2/9/24

Conquistador Homeowners' Association, Inc. Use Only

Date Received by Architectural Review Committee (ARC):

Recommended by ARC

Date: 2/17/24

By: 

Recommended by ARC with Conditions Date: _____

By: _____

Not Recommended by ARC

Date: _____

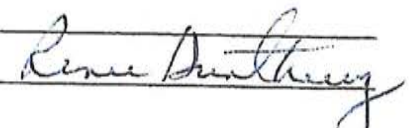
By: _____

Explanation(s) / Comment(s) _____

Date Received by Architectural Control Board (ACB)

Approved by ACB

Date: 2/17/24

By: 

Approved by ACB with Conditions

Date: _____

By: _____

Disapproved by ACB

Date: _____

By: _____

Explanation(s) / Comment(s) _____

Received 1/29/04
BG

Conquistador

APPLICATION FOR ARCHITECTURAL REVIEW

Please deliver or mail this form with any related information to:

Conquistador Homeowners' Association, Inc.
1800 SE St. Lucie Blvd., Clubhouse
Stuart, FL 34996

Attn. Architectural Review Committee

**PLEASE DO NOT FAX OR
EMAIL APPLICATION TO
ARCHITECTURAL
REVIEW COMMITTEE**

Name of Homeowner / Applicant:

Mona Gerard

Project Property Address:

1846 S.E. El Pinar Lane

Phone:

973-228-5290

Email:

Is this a resubmittal? ☐ Yes ☒ No Is this an emergency requiring expedited handling? ☐ Yes ☒ No

Approval is requested for the following modifications(s) / alteration(s) to the above property. Type in or print out and fill in the information relating to your project. Please note in the Additional Information section if this request is for an identical replacement / repair / or reconditioning of an existing item:

- | | | |
|--|---|--|
| <input type="checkbox"/> Addition / Alteration | <input type="checkbox"/> Generator | <input type="checkbox"/> Propane Tank |
| <input type="checkbox"/> Decorative Shutters | <input type="checkbox"/> Hurricane Shutters | <input type="checkbox"/> Roof |
| <input checked="" type="checkbox"/> Driveway | <input type="checkbox"/> Lamp Post / Fixture | <input type="checkbox"/> Screen Room / Enclosure |
| <input type="checkbox"/> Exterior Door | <input type="checkbox"/> Mailbox/Mailbox Post Color | <input type="checkbox"/> Siding / Stucco |
| <input type="checkbox"/> Fences | <input checked="" type="checkbox"/> Paint* | <input type="checkbox"/> Soffits / Facia |
| <input type="checkbox"/> Garage Door | <input type="checkbox"/> Patio / Deck | <input type="checkbox"/> Water Features |
| <input type="checkbox"/> Garage Screen Door | <input type="checkbox"/> Pool / Spa Equipment | <input type="checkbox"/> Window Replacement |
| <input type="checkbox"/> Solar - Hot Water | <input type="checkbox"/> Solar - Pool Heating | <input type="checkbox"/> Solar - Photovoltaic |

* **Paint Specifics** - Please specify colors by code numbers if using the Approved Exterior Colors for All of Conquistador if you are using the approved color palette. If you are not using the approved color palette the applicant must submit color samples for the following:

House Color: _____ Manufacturer: _____

Trim Color: _____ Manufacturer: _____

Garage Door Color: _____ Manufacturer: _____

Front Door Color: _____ Manufacturer: _____

Other: *Driveway* Manufacturer: *SW 7004*

Same Existing Color

Please check and attach appropriate items as necessary:

- | | |
|---|---|
| <input type="checkbox"/> Initial Plan(s) / Specification(s) | <input type="checkbox"/> Revised Plan(s) / Specification(s) |
| <input type="checkbox"/> Drainage Surface Water Plan | <input type="checkbox"/> Grading Plan |
| <input type="checkbox"/> Color Sample(s) | <input type="checkbox"/> Texture Sample(s) |

Work to be done by
Jeff Gerard

Additional Information:

Anticipated Commencement Date: Feb 21 Anticipated Completion Date: Feb 23

By signing this Application, the applicant acknowledges that approval by the Architectural Control Board is subject to the following:

1. The applicant agrees that no work shall commence prior to receiving written approvals by the Architectural Control Board.
2. The applicant shall obtain the necessary building permits from the Martin County Building Department. Items requiring building permits can be found at <https://www.martin.fl.us/martin-county-services/do-i-need-permit>
3. The applicant shall use contractors / subcontractors registered with the Martin County Building Department.
4. The applicant shall comply with all provisions of the Conquistador Homeowners' Association, Inc. governing documents as well as all other governing documents.
5. The activities associated with this application shall not infringe on the property rights of others, and shall take place Monday – Friday, 8 AM – 5 PM.
6. Access to the area(s) of construction shall be allowed through the applicants' property. If access to a neighboring property is required, the applicant shall receive written permission from neighboring property owner. The applicant shall be responsible for any repairs to damage caused during the project to neighboring properties or common areas.
7. The applicant agrees not to deviate from the intent or substance of the approved Application. Should a deviation occur, the applicant agrees to rectify the deviation upon notification from the Architectural Control Board.
8. Remodeling debris, including, but not limited to cabinets, doors, rugs, appliances, or other large materials, must be disposed of privately by the owner at his/her expense through a private refuse company or by the contractor performing the work. If a dumpster is required for your project to dispose of debris it is requested that the dumpster be onsite no more than 30 days.

Homeowner / Applicant Signature: Mona Gerald Date: 1/29/2024

Conquistador Homeowners' Association, Inc. Use Only

Date Received by Architectural Review Committee (ARC): 1/29/2024

Recommended by ARC Date: 2/2/2024 By: [Signature]

Recommended by ARC with Conditions Date: _____ By: _____

Not Recommended by ARC Date: _____ By: _____

Explanation(s) / Comment(s) _____

Date Received by Architectural Control Board (ACB) _____

Approved by ACB Date: 2/2/2024 By: [Signature]

Approved by ACB with Conditions Date: _____ By: _____

Disapproved by ACB Date: _____ By: _____

Explanation(s) / Comment(s) _____

Received 1/29/24
BG

Conquistador

APPLICATION FOR ARCHITECTURAL REVIEW

Please deliver or mail this form with any related information to:

Conquistador Homeowners' Association, Inc.
1800 SE St. Lucie Blvd., Clubhouse
Stuart, FL 34996

Attn. Architectural Review Committee

**PLEASE DO NOT FAX OR
EMAIL APPLICATION TO
ARCHITECTURAL
REVIEW COMMITTEE**

Name of Homeowner / Applicant: Scott Magnusson

Project Property Address: 3121 SE Gran Via Way Lot #50

Phone: (973) 519-0441 Email: Scott.Magnusson@gmail.com

Is this a resubmittal? Yes No Is this an emergency requiring expedited handling? Yes No

Approval is requested for the following modification(s) / alteration(s) to the above property. Type in or print out and fill in the information relating to your project. Please note in the Additional Information section if this request is for an identical replacement / repair / or reconditioning of an existing item:

Addition / Alteration	Generator	Propane Tank
Decorative Shutters	Hurricane Shutters	Roof
Driveway	Lamp Post / Fixture	Screen Room / Enclosure
Exterior Door	Mailbox/Mailbox Post Color	Siding / Stucco
Fences	<u>Paint*</u>	Soffits / Facia
Garage Door	Patio / Deck	Water Features
Garage Screen Door	Pool / Spa Equipment	Window Replacement
Solar - Hot Water	Solar - Pool Heating	Solar - Photovoltaic

* Paint Specifics - Please specify colors by code numbers if using the Approved Exterior Colors for All of Conquistador if you are using the approved color palette. If you are not using the approved color palette the applicant must submit color samples for the following:

House Color: SW 7568 Neutral Ground Manufacturer: Sherwin Williams
Trim Color: SW 7532 Urban Putty Manufacturer: Sherwin Williams
Garage Door Color: _____ Manufacturer: _____
Front Door Color: SW 7614 St. Barts Manufacturer: Sherwin Williams
Other: Back Door " " " " " "

Please check and attach appropriate items as necessary:

Initial Plan(s) / Specification(s)

Revised Plan(s) / Specification(s)

Drainage Surface Water Plan

Grading Plan

Color Sample(s)

Texture Sample(s)

Additional Information: _____

Anticipated Commencement Date: WK OF 2/5 Anticipated Completion Date: W/C OF 2/15

By signing this Application, the applicant acknowledges that approval by the Architectural Control Board is subject to the following:

1. The applicant agrees that no work shall commence prior to receiving written approvals by the Architectural Control Board.
2. The applicant shall obtain the necessary building permits from the Martin County Building Department. Items requiring building permits can be found at <https://www.martin.fl.us/martin-county-services/do-i-need-permit>
3. The applicant shall use contractors / subcontractors registered with the Martin County Building Department.
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8. Remodeling debris, including, but not limited to cabinets, doors, rugs, appliances, or other large materials, must be disposed of privately by the owner at his/her expense through a private refuse company or by the contractor performing the work. If a dumpster is required for your project to dispose of debris it is requested that the dumpster be onsite no more than 30 days.

Homeowner / Applicant Signature: Scott Magnuson Date: 2/28/2024

Conquistador Homeowners' Association, Inc. Use Only

Date Received by Architectural Review Committee (ARC): _____

Recommended by ARC Date: 2/1/24 By: Renee Douthett

Recommended by ARC with Conditions Date: _____ By: _____

Not Recommended by ARC Date: _____ By: _____

Explanation(s) / Comment(s) _____

Date Received by Architectural Control Board (ACB) _____

Approved by ACB Date: 2/1/24 By: Renee Douthett

Approved by ACB with Conditions Date: _____ By: _____

Disapproved by ACB Date: _____ By: _____

Explanation(s) / Comment(s) _____

SW 7568
Neutral Ground

261-C5

SW 7532
Urban Putty

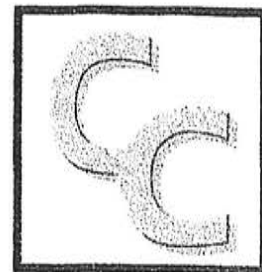
285 C3

SW 7614
St. Bart's

280-C7

Cosmopolitan Construction
4974 SE Horseshoe Point Rd
Stuart, FL 34997 US
+1 7723248604
cosmoconstruct@gmail.com
www.cosmoconstructfl.com

Estimate



ADDRESS
Scott Magnussen
3121 SE Gran Via Way
Stuart, FL 34996

ESTIMATE #	DATE
1345	05/21/2023

ACTIVITY	DESCRIPTION
Services	House Remodel.
Services	Description of work to be done at 3121 SE Gran Via Way, Stuart FL 34996:

Masonry work: As per drawings, infill existing openings. Open up exterior wall to accommodate new front door.

Windows and Sliding doors: As per drawings, supply and install new PGT Impact Insulated vinyl windows and two sliding doors, one in the dining room area and one in the family room area. (Exterior sunroom sliders are not included in this estimate).

Exterior doors: As per drawings, supply and install new front and rear doors. BHI pre-hung single fiberglass Impact Low-e with full glass. Allowance: up to \$1,400.00 each.

ACTIVITY**DESCRIPTION**

Pavers: Replace existing pavers in Courtyard and walkway. Pavers to be chosen by owner from samples provided.

Clean area upon job completion. Debris will be discarded properly.

NOTE: The above estimate is based solely upon the project description and initial inspection of the project work site. Estimate could change upon discovery of the need for additional work and or materials once the project has started. Any alterations or deviation from the above specifications involving extra costs will be executed only upon written consent by customer and will become an extra charge over and above the estimate.

NOTE: Cosmopolitan Construction will provide all necessary equipment, labor, materials and supervision to complete the work. Cosmopolitan Construction will obtain all necessary permits to perform work. Homeowner is responsible for the permit fees. Homeowner to supply: Laundry room and kitchen appliances, cabinets hardware (pulls and handles), bathroom accessories (Toilet paper holder, towel hanger, mirror, etc), light fixtures, ceiling fans, and fireplace insert.

Fully Licensed and Insured*

Do not move, improve!

**Request for Taxpayer
Identification Number and Certification**

Give Form to the
requester. Do not
send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

COSMOPOLITAN CONSTRUCTION AND MAINTENANCE CORP.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☒ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

4974 SE HORSESHOE PT. RD.

Requester's name and address (optional)

6 City, state, and ZIP code

STUART FL 34997

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

134041397

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ▶

Date ▶

7/7/23

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1099 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/6/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER LIVINGS INSURANCE 2646 SW MAPP ROAD, #101 PALM CITY, FL 34990	CONTACT NAME: AUDREY PHONE (A/C, No, Ext): 772-221-0000 FAX (A/C, No): E-MAIL ADDRESS: agayle@livingsinsurance.com																					
INSURED COSMOPOLITAN CONSTRUCTION AND MAINTENANCE CORP 4974 DE HORSESHOE POINT RD STUART, FL 34997	<table border="1"><thead><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr></thead><tbody><tr><td>INSURER A:</td><td>HERITAGE PROPERTY & CASUALTY INS CO</td><td></td></tr><tr><td>INSURER B:</td><td></td><td></td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></tbody></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	HERITAGE PROPERTY & CASUALTY INS CO		INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER C:																						
INSURER D:																						
INSURER E:																						
INSURER F:																						

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			HCR011074	9/20/2023	9/20/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
<input type="checkbox"/>	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
<input type="checkbox"/>	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
<input type="checkbox"/>	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y <input type="checkbox"/> N	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

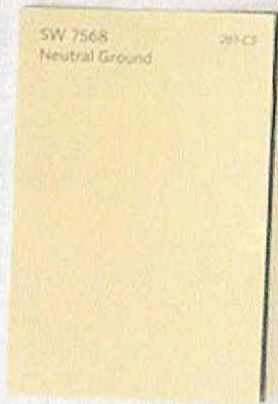
CERTIFICATE HOLDER**CANCELLATION**

CONQUISTADOR HOME OWNERS ASSOCIATION 1800 SE SAINT LUCIE BLVD STUART FL 34996	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE J. MATTHEW LIVINGS
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CERTIFICATE OF LIABILITY INSURANCE							Date 12/13/2023		
Producer: Plymouth Insurance Agency 2739 U.S. Highway 19 N. Holiday, FL 34691 (727) 938-5562				This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.					
Insured: South East Personnel Leasing, Inc. & Subsidiaries 2739 U.S. Highway 19 N. Holiday, FL 34691				Insurers Affording Coverage			NAIC #		
				Insurer A: Lion Insurance Company			11075		
				Insurer B:					
				Insurer C:					
				Insurer D:					
Insurer E:									
Coverages <small>The policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies. Aggregate limits shown may have been reduced by paid claims.</small>									
INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits			
		GENERAL LIABILITY <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence	\$		
		Damage to rented premises (EA occurrence)				\$			
		Med Exp				\$			
		Personal Adv Injury				\$			
		General Aggregate				\$			
		Products - Comp/Op Agg				\$			
		AUTOMOBILE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)	\$		
		Bodily Injury (Per Person)				\$			
		Bodily Injury (Per Accident)				\$			
		Property Damage (Per Accident)				\$			
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible				Each Occurrence	\$		
		Aggregate				\$			
A	Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? NO If Yes, describe under special provisions below.		WC 71949	01/01/2024	01/01/2025	X	WC Statutory Limits	OTH- ER	
	E.L. Each Accident					\$1,000,000			
	E.L. Disease - Ea Employee					\$1,000,000			
	E.L. Disease - Policy Limits					\$1,000,000			
Other Lion Insurance Company is A.M. Best Company rated A (Excellent). AMB # 12616									
Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: Client ID: 98-66-966 Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company": <p style="text-align: center;">Cosmopolitan Construction and Maintenance Corp.</p> Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s), while working in: FL. Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity. A list of the active employee(s) leased to the Client Company can be obtained by emailing a request to certificates@lioninsurancecompany.com Project Name: ISSUE 07-07-23 (KLT)									
Begin Date: 3/25/2021									
CERTIFICATE HOLDER CONQUISTADOR HOME OWNERS ASSOCIATION 1800 SE ST. LUCIE BLVD. STUART, FL 34996				CANCELLATION Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives. <div style="text-align: center;">  </div>					

House



Chair



Door



Re: Magnussen - Application for Architectural Review

Scott Magnussen <scott.magnussen@gmail.com>

Tue 1/30/2024 11:13 AM

To: Bonnie Guenther <manager@conquistadorliving.com>

Most similar:

Body sw6098 pacer white

Trim sw6064 reticence

Door sw6487 cloud burst

Best regards,

Scott

(M) 973 519-0641

On Jan 29, 2024, at 4:02 PM, Bonnie Guenther <manager@conquistadorliving.com> wrote:

Hi, Scott,

Please let me know which colors in the colorbook attached your chosen colors are similar to.

Thanks-

Bonnie Guenther, LCAM

Manager

Conquistador Homeowners' Association, Inc.

1800 SE St Lucie Blvd

Stuart, FL 34996

Office 772-283-2363 Ext 101

Fax 772-283-7785

manager@conquistadorliving.com

From: Scott Magnussen <scott.magnussen@gmail.com>

Sent: Sunday, January 28, 2024 1:27 PM

To: Bonnie Guenther <manager@conquistadorliving.com>

Subject: Magnussen - Application for Architectural Review

Hi Bonnie,