

| Office E-mail: frontdeskcbcmarco@gmail.com | | | | |
|---|--|--|--|--|
| x grow of Terry GING RASS, the owner(s) of Unit x 1400 | | | | |
| Crescent Beach Condominiums of Marco Island, ask permission to (describe type of work): | | | | |
| Lanar Power Bug Screens Trong Box | | | | |
| Screen Color is Black | | | | |
| to Indemnify and Hold Harmiess Crescent Beach Condominium Association, inc. for any loss, costs or damage to the common elements, including attorney's fees, incurred by the Association as a result of the owner's performing the permitted work, including work performed by contractors and subcontractors, both of which are required to submit their license & itability insurance, prior to starting. | | | | |
| *Owner(s) Signature: X Date X | | | | |
| Signature: X Date X | | | | |
| A \$500.00 Deposit will be required by contractors doing major renovations in units. Contractors may start renovations May 1st and finish no later than September 30th, or forfeit their deposit at a \$100 fine for each day after the September 30th. Work hours: MON-FRI ONLY; 8:00 A.M. TO 4:00 P.M. | | | | |
| X (Owner Initial) X (Owner Initial) | | | | |
| Name of Contractors Performing Work: :X 1st Choice Hurricane Protection, LLC / Lance Lustik | | | | |
| ATTACH A COPY OF ALL SUBS WITH THEIR LICENSE & INSURANCE TO THIS FORM LISTING CRESCENT BEACH & OWNER AS CERTIFICATE HOLDER | | | | |
| Company:X 1st Choice Hurricane Protection, LLC Tele: () X 239-325-3400 | | | | |
| Street: X 25241 Bernwood Dr #6 City: X Bonita Springs St: X FL Zip: X 34135 | | | | |
| Estimated Date to Begin Work: X tbd | | | | |
| contractors signature x DATE x 5-18-2022 | | | | |
| ALL WATER SUPPLY LINES UNDER VANITY SINKS & TOILETS MUST BE HARD PIPE, NO STAINLESS-STEEL FLEXIBLE WATER SUPPLY LINES ARE PERMITTED | | | | |
| ATTACH A SHEET EXPLAINING DETAILS WITH BLUEPRINT, LICENSE & INSURANCE LISTING ASSOCIATION | | | | |
| & HOMEOWNER AS CERTIFICATE HOLDER | | | | |
| "NO LOCK BOXES" ARE PERMITTED ON OWNERS DOOR" X DOOR DISAPPROVE by Director Approved Manager Disapprove by Director | | | | |
| Rev.11 21.19 100 N. Blvd. • Marco Islano, 34145 • (239) 642-0100 • Fax (239) 642-8908 | | | | |

2019-12-03 cbmarco.com

100 N. Collier Blud SCREENED FLORIDA ROOM Marco Island FL 34145 32' x 8' WRAPAROUND GLASS CORNER SUN DECK 8' x 17' LIVING / DINING ROOM 19'-4" x 34" RANGE / OVEN & MICROWAVE DW 10'-9" x 9'-6' REF LOCKED STORAGE FOYER MASTER BEDROOM SUITE 477 SQ.FT. 16-6" DRESSING AREA BEDROOM / DEN BEDROOM 2 9'-6" x 14'-3" 12' x 14'-3" WALK-IN CLOSET

1St Choice Hurri cane Protection LLC 239-325-3400 25241 Bern wood Dr. #6 Bonita Springs FL 34145

THREE BEDROOM (or DEN) - TWO & ONE THIRD BATHS

'B' FLOOR PLAN - CORNER UNIT

TOTAL LIVING AREA: 2269 SQ. FT.

A/C AREA: 1877 SQ. FT.

DIMENSIONS & CALCULATIONS ARE APPROXIMATE

RESCENT-BEACH



DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION STATE OF FLORIDA

CONSTRUCTION INDUSTRY LICENSING BOARD

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

LUSTIK, LANCE WILLIAM

1ST CHOICE HURRICANE PROTECTION LLC 25241 BERNWOOD DR SUITE 6 BONITA SPRINGS FL 34135

LICENSE NUMBER: CGC1522106

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at MyFloridaLicense.com

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.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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.

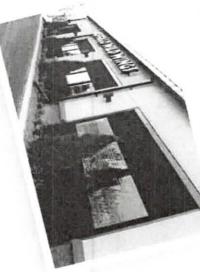
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed.

| agher Risk Management S Lane Suite 100 109 urricane Protection LLC. indows & Shutters, LLC. ood Dr, #6 s FL 34145 | | nc. | INSURER A : Auto-OWI | -7171 rown1@ajg.c urer(s) Afford ners Insurance | OM DING COVERAGE | 39-262-5360 NAIC# | |
|---|---|--|--|--|--|--|--|
| Lane Suite 100 109 urricane Protection LLC. indows & Shutters, LLC. ood Dr. #6 | | | INSURER A : Auto-Own INSURER B : Southern | rown1@ajg.c JRER(S) AFFORI Ders Insuranc | OM DING COVERAGE | | |
| urricane Protection LLC. indows & Shutters, LLC. ood Dr. #6 | & | 1STCH-4 | INSURER B : Southern | ners Insuranc | DING COVERAGE | NAIC# | |
| urricane Protection LLC. indows & Shutters, LLC. ood Dr. #6 | & | 1STCH-4 | INSURER A : Auto-OWI | ners Insuranc | | NAIC# | |
| indows & Shutters, LLC. ood Dr, #6 | & | 1STCH-4 | INSURER B : Southern | | e Company | | |
| indows & Shutters, LLC. ood Dr, #6 | & | 1STCH-4 | INSURER B : Southern | | | 18988 | |
| indows & Shutters, LLC. ood Dr, #6 | & | | | INSURER B : Southern-Owners Insurance Company | | | |
| ood Dr, #6 | | | INSURER C : | | | | |
| s FL 34145 | | | INSURER D : | | | | |
| S 1 L 34 143 | 5241 Bernwood Dr, #6 Sonita Springs FL 34145 | | | | | | |
| | | | INSURER E : | | | - | |
| | | MINER 440007000 | INSURER F : | - | REVISION NUMBER: | | |
| CER | TIFICATE | NUMBER: 110307630 | VE DEEN ICCUED TO | | | E POLICY PERIOD | |
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| UTO | | | | | BODILY INJURY (Per person) | \$1,000,000 | |
| D SCHEDULED | | 1 | | 1 | BODILY INJURY (Per accident) | \$ 1,000,000 | |
| NON-OWNED | | | 3 | | PROPERTY DAMAGE (Per accident) | \$1,000,000 | |
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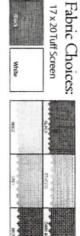
| | | CERTIFICATI | FOFITABLE | TTV TNC | LIDANCE | | Date |
|---|------------------------|--|---|---|---|--|--|
| CERTIFICATE OF LIABILITY INSURANCE | | | | | | 12/7/2021 | |
| Producer: Plymouth Insurance Agency | | | | | of information only and | | |
| 2739 U.S. Highway 19 N. | | | rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below. | | | | |
| | | Holiday, FL 34691 | | ur alter the ti | verage anorded by the | policies delow. | |
| | | (727) 938-5562 | | 1 | Insurers Affording Cove | rage | NAIC # |
| Insu | red: | South East Personnel Leasing, | Inc. & Subsidiarie | s Insurer A: | Insurer A: Lion Insurance Company | | |
| 2739 U.S. Highway 19 N. | | | | Insurer B: | | | |
| Holiday, FL 34691 | | | Insurer C: | | | | |
| | | | | Insurer D: | | | |
| | | | | Insurer E: | | | |
| The po | spect to wh | surance listed below have been issued to the insured in this certificate may be issued or may pertain, the have been reduced by paid claims. | I named above for the policy insurance afforded by the p | period indicated. Not blicles described here | withstanding any requirement, in is subject to all the terms, ex | term or condition of any contrac clusions, and conditions of such | t or other document policies. Aggregate |
| INSR LTR | ADDL | Type of Insurance | Policy Number | Policy Effective Date | Policy Expiration Date | Lin | nits |
| - | | GENERAL LIABILITY | | MM/DD/YY) | (MM/DD/YY) | Fact Orange | |
| | | Commercial General Liability | i i | | | Each Occurrence | - |
| | | Claims Made Occur | | | | Damage to rented premises (occurrence) | EA S |
| | | H | 1 | | | Med Exp | 5 |
| | | General aggregate limit applies per: | 1 | | | Personal Adv Injury | 5 |
| | | Policy Project LOC | 1 1 | | | General Aggregate | 5 |
| | | Project L Loc | 1 1 | | i | Products - Comp/Op Agg | s |
| - | | AUTOMOBILE LIABILITY | | | - | Combined Single Limit | |
| | | | 1 | | | (EA Accident) | 4 |
| | ł | Any Auto All Owned Autos | 1 1 | | 1 | Bodily Injury | |
| | | Scheduled Autos | 1 1 | | | (Per Person) | - |
| | | Hired Autos | 1 | | | Bodily Injury | |
| | | Non-Owned Autos | | | 1 | (Per Accident) | i i |
| | | | | | | Property Damage | |
| | | | | | 1 | (Per Accident) | <u> </u> |
| | | EXCESS/UMBRELLA LIABILITY | T | | | Each Occurrence | |
| | | Occur Claims Made | 1 | | 1 | Aggregate | |
| | | Deductible | | | l | | |
| A | Worke | ers Compensation and | WC 71949 | 01/01/2022 | 01/01/2023 | | TH- |
| | | oyers' Liability | | | ì | | R |
| | | prietor/partner/executive officer/member | 1 1 | | 1 | E.L. Each Accident | \$1,000,000 |
| | | ed? NO | 1 | | g . | E.L. Disease - Ea Emplo | yee \$1,000,000 |
| | ir res, | describe under special provisions below. | | | | E.L. Disease - Policy Lin | nits \$1,000,000 |
| | Other | | Lion Insuran | ce Company is | A.M. Best Company | rated A (Excellent). | AMB # 12616 |
| | cription | ns of Operations/Locations/Vehicles/ | Exclusions added by | Endorsement | Special Provisions: | Client ID: | |
| | - age only | | | urricane Protecti | | owo mpgratemati Patiti Pati | |
| Cov | erage only | applies to injuries incurred by South East Pe | ersonnel Leasing, Inc. & S | subsidiaries active e | employee(s), while working | In: FL | |
| Cov | erage doe | s not apply to statutory employee(s) or indep | pendent contractor(s) of t | he Client Company | or any other entity. | | |
| | | ctive employee(s) leased to the Client Compa | ny can be obtained by fa | xing a request to (7 | 727) 937-2138 or email cer | tificates@lioninsurancecom | pany.com |
| | ject Nan | | | | | | |
| 133 | UE 01-04 | -21 (SS) | | | | | |
| | | | | | | | |
| | | | | | | Begi | in Date: 4/22/2019 |
| CERTIFICATE HOLDER CANCELLATION CRESCENT BEACH Should any of the above described policies be cancelled before the expiration date thereof, the issuing | | | | | | thereof, the issuing | |
| | | CONDOMINIUM ASSOCIATION INC | | insurer will endeavo | r to mall 30 days written notice | to the certificate holder named and upon the insurer, its agents | to the left, but failure to |
| | | 100 N COLLIER BLVD | | TO SO GRAIN HILL/USE I | | - remark (** free | |
| | MARCO ISLAND, FL 34145 | | | | x Janes | Lam | |

Mounting Options

- Flush Mount: Installed flush to the wall.
 Trapped Mount: Installed in a restricted opening.
 Recessed Mount: Installed with side rails or hood concealed in a wall.
- ceiling or other architectural



Suntex 80 Premium Solar



Suntex 90 Premium Solar

| Frame | O/3 |
|----------------|---------------------------|
| Frame Choices: | nuco |
| ** | Description of the second |
| | # No. |
| | 4 |
| | total and a second |

Warranties

Powder Coating Warranty: AAMA 2603 (Interpon D1010 - 10-year inland; 1-year coastal (within 1 mile of coastal shoreline).

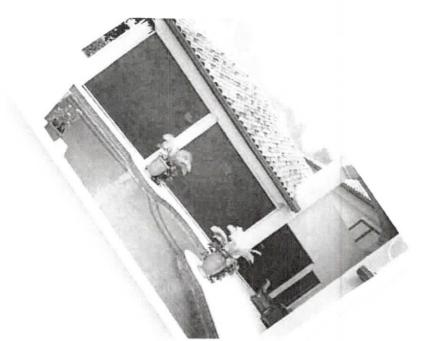
20-50NM Override Motors are supported by a 5-year replacement warranty. 20-50NMSmart Motors are supported by a 3-year replacement warranty.

Electronics are supported by a 2-year replacement warranty.

Copyright 2015, Town & Country Industries

TCI142 (4/15)

Enjoy the outdoors, From indoors.



Motorized Screens by Manuastroshield*



ifestyle!

the comfort of your own home. piece of the home. In a matter of seconds, you and the family will be able to enjoy a relaxing evening doing the finer things in life from product. A Motorized Screen will provide you with a modern and sure you are receiving all the conveniences you desire in one sophisticated home décor, while turning your patio into a center When making an outdoor living space decision, you want to make

Built_{Around} Your Needs



No matter what your needs are, when you purchase a Motorized Screen, you have the piece of mind knowing we have the necessary components to satisfy them. Our system allows you, the homeowner, to completely customize each individual unit based on your LIFESTYLE.

From electronics to fabric density and color, to the frame color to remote controls, you will have the ability to

adapt each screen to fit your home.

Expanded Outdoor Living Space

button, you can now move your dinner outside blocking harmful UV Rays. With the click of a during the warmer months, allowing the breeze family's living space while keeping the bugs out making a lifestyle decision. Our Motorized choosing a motorized exterior screen, you are living space more often and effectively. By with a breezy bug-free environment. through during the cooler ones, as well as Screen will immediately increase the size of your It's no secret all of us wish to utilize our outdoor

Questions to Answer:

- Which frame color do I want?
 Which bottom bar color do I want?
- What color and density screen would work best for my home?
- How would I like my unit mounted?
- Which electronic configuration would make operating my units easiest?

of total control and the quality assurance, of our motors and electronics puts them in a class With multiple configurations available, the agility motors and electronics are innovation at its best cornerstone of every product we offer. Our technical support, and innovation that is the programming options, you have the convenience security and reliability. With a multitude of support low data rates, low power consumption, these industry leading components are the beauty of your outdoor screen into motion. The Motorized Screen electronics will put the integration. Our state of the art electronics perfect marriage of power, precision and Designed by Swedish and American engineers,