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**WORK ORDER FOR
CINNAMON COVE TERRACE VII CONDOMINIUM ASSOCIATION**

NAME: _____ DATE: _____ PHONE: _____

ADDRESS: _____ UNIT: _____ BLDG.: _____

REQUEST: _____

APPROVED BY BOD? _____ NAME: _____ DATE: _____

SPACE BELOW RESERVED FOR MANAGEMENT

CONTRACTOR: _____

WORK ASSIGNED: _____ DATE RECEIVED: _____
DATE COMPLETED: _____

COMMENT(S): _____

SPACE BELOW RESERVED FOR BOARD INSPECTION OF COMPLETED WORK

APPROVED BY BOARD MEMBER (NAME): _____

SIGNATURE: _____ DATE: _____

TOTAL MATERIALS \$ _____ TOTAL COST OF WORK REQUEST \$ _____

BILL OWNER _____ BILL ASSOCIATION _____ OTHER : _____