August 2025

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Manager's Corner -

With the summer rains upon us, the community is looking pretty good. Please keep in mind that even though your lawn may be green, that green may not be actual grass. Weeds turn green, too.

We will be starting the budget process for 2026 shortly. We will be reviewing expenses through June 30 and anticipated expenditures throughout the remainder of the year. We will also be contacting the various utility companies and contract vendors to determine what their rates will be for 2026. The insurance premiums for 2025 were flat so we hope that will also be the case for 2026.

Charla Galbraith, CMCA, AMS PCAM®

For Sale as of the printing of this edition:

Homes for sale:

4 Drury Lane; 19 Drury Lane; 144 Melody Lane; 159 Melody, 170 Melody Lane, 186 Royal Palm (previous sales cancelled); 209 Seagull; and 229 Dixie Lane.

HELLO ADDRESS GOOD-BYE

None

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*New Office Hours:

Monday & Friday 9:00 a.m. to 1:00 p.m. Tuesday, Wednesday & Thursday 9:00 a.m. to 3:00 p.m. tarponshoresro@tsrop.com

KEEP COOL THIS SUMMER.....



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Some Fun Events that Happened in the Month of August

Enjoy the month of August. Here are some interesting facts about holidays, flowers, and birthstones.

1. Birthstone:

The predominant birthstone for August is peridot, which is also thought to represent power, healing, and defense against evil and nightmares.

Moreover, it is considered to provide peace and joy to the wearer. August birthdays are seen as fortunate due to the luckiness of the peridot.

2. Flower:

Gladiolus and poppies, two birth flowers, are associated with August.

The gladiolus is a vibrant and multi-coloured flower that represents generosity, the strength of character, and deep sincerity. In contrast, the poppy symbolizes imagination, eternal sleep, and oblivion.

3. Zodiac signs

Leo and Virgo are the August zodiac signs in astrology. The astrological sign of Leo is in effect from July 23 through August 22, while Virgo is in effect from August 23 to September 22.

"The Original Name for August in Anglo-Saxon Times

August was referred to as "weed month" during the Anglo-Saxon period and is directly translated as such today.

This name was given to the month due to the rapid growth of weeds and other plants in the northern hemisphere during this time.

Quirky Celebrations in August

- August is home to several unusual celebrations, and here are a few of our favorites.
- On August 3rd, people across the nation celebrate National Watermelon Day.
- · August 10th is designated as National Lazy Day.
- Another notable celebration is on August 16th, known as National Roller Coaster Day.
- Finally, August 28th is dedicated to all things fancy, as it's National Bow Tie Day.

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Condolences

Our sincere condolences go out to the family and friends of longtime owner and past board member, Jeanne Scheuch of 22 Drury Lane, who passed away on June 30, 2025. She will be missed.

Kind Reminder 🔠



When using the ICE MACHINE in the laundry room, please close the lid after you are done!

Name Plates

If you are interested in a name plate for your coach, please contact the office. The cost of a name plate is \$30.00. This does not include the house number, just the name only.

Example: Smith, Joe and Mary





Carports



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August Anniversaries

- 1 Bill & Janie Horner
- 4 Paul & Lorraine McCov
- 6 Donald & Joan DeLong Alan & Augustine Riddell
- 8 Corey & Bridget Fecteau
- 10 Steven & Barbara Madrick
- 17 William & Nancy Fortier
- 26 Robert & Joan Bucher
- Jim & Anita Goga
- Jerry & Ann Saylor



August Birthdays

- 8/1 Larry Manion Salvatore Esposito 8/2
- Teresa Hiatt 8/3 **Gregory Lyons**
- 8/5 Marlene Gentry
- 8/6 **Douglas Scott**
- Michele Parker-Wooten 8/7
- Carol Rossel Guy D'Arezzo
- 8/9 Mark Arle Robert Conley
- 8/10 Yvonne Sowers
- 8/11 Joan DeLong
- 8/12 Jerry Saylor
- 8/13 Gale Connolly
- 8/14 Richard Cardinale Rosanne Conley
- 8/15 Gerard LaLonde Monique Plourde
- 8/16 Allen Austin
- 8/19 Richard DeMoors Gloria Ferrera
- 8/22 John Deboard
- 8/23 David Brown
- 8/24 **Edward Marzheuser**
- 8/26 Joseph Lombardo
- Tom Williams
- William Mills 8/30 Susan Lyons

Henry "Hank" and Lori Ford

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Water Wisely



Reminder to adjust your irrigation timer settings to meet the local watering restrictions. Additionally, it is important to adjust your sprinkler heads and make sure they are properly installed. (See below Rules & Regulations, Section 5(a), Lawn Maintenance)

• 5(a), Every home must have a grass lawn and an approved underground water sprinkling system installed and in good working order. Sprinkler heads must be installed at ground level or lower than the cement donuts, if used. Minimum of 4" pop-ups must be installed. Systems must remain on at all times. Excess water is not allowed to run unnecessarily onto the roadway. Lawn mowing, lawn fertilization and lawn insecticide applications are provided by the Association, as well as edging and trimming around homes and trees. Lessees are responsible for watering their lawns and plants. An exterior well water faucet has been provided for use in watering lawns and plants. Lessees will be allowed to sprinkle their lawns with hand-held sprinklers. When watering lawns and plants, use well water only. Metered City water is not to be used. Sprinkler systems should be used on assigned days, as per Southwest Florida Water Association District (SWFWD) regulations. The Association is not responsible for damage to any sprinkler system that the Lessees installs or maintains. Sprinkler Systems are not to be worked on or tested on days when lawns are mowed.

Watering is limited to the following hours to minimize losses from evaporation:

- Morning Hours: 12:01 a.m.to 8:00 a.m.
- Evening Hours: 6:00 p.m. to 11:59 p.m.

Watering is prohibited from 8:00 a.m. – 6:00 p.m. especially on Fridays due to the lawn maintenance company being on site to perform the lawn service. If your irrigation timer is not set for the proper day and time and is running when the lawn maintenance company is on site, this may result in the system being turned off by the association so the lawn maintenance company can proceed with their scheduled service.

If you should have any questions as to the day and time that your irrigation system should run, please contact the Tarpon Shores office at 727-938-2600.

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We have taken steps to limit exposure to the virus by making our customers aware that there is no need to have any contact with our employees if you choose to do so. Our business falls under the state's guidelines as "Essential Business".

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Storm Preparedness/ Special Needs Persons

Sign up for Special Needs if you have medical, functional or special transportation needs in an emergency. See the eligibility list below and attached Special Needs form.

- Need oxygen
- 2. Requiring assistance with routine care and medications.
- 3. Requiring mobility assistance.
- 4. Dependence on electricity.
- 5. Requiring transportation assistance.

You can register online at https://pinellas.gov/special-needs/

Stay informed by installing the Pinellas Ready App for FREE on your iphone or Android:

https://pinellas.gov/ready-pinellas/

(See more information on pages 10 & 11)

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Special Needs Evacuation Program Registration

Page | 1

Program Overview: The Pinellas County Special Needs Evacuation Program provides transportation and sheltering assistance to Pinellas County residents with certain medical needs or with challenges accessing emergency shelters. To do this, Pinellas County Emergency Management (PCEM) maintains a list of Pinellas County residents who apply for and are eligible for free transportation assistance and/or special needs sheltering. This list enables us to identify and support individuals who need assistance during an emergency evacuation.

Program Eligibility: You must meet at least one of the criteria below to qualify for the special needs program:

- You require transportation assistance to a shelter because you do not have personal transportation or access to other available transportation means.
- You require assistance with, but not limited to, reliance on supplemental oxygen, life-sustaining devices powered by electricity, mobility challenges, medication assistance, dependence on dialysis, or cognitive conditions such as Alzheimer's or dementia.

How to Register: To register, complete the form on page 2 and mail or fax it to Pinellas County Emergency Management (mailing address and fax number are on the bottom of page 2).

For those who are eligible, you will receive a confirmation letter and instructions on what to expect if the program is activated and you may need to evacuate. Annual confirmation letters are sent in May. If you register after May 1st, the letters are sent out biweekly through November 30th.

Note: If you <u>do not</u> need transportation assistance and <u>do not</u> meet medical requirements for special needs sheltering, your form <u>will not</u> be entered into our Special Needs Evacuation Program. We will send you a message via phone, text and email to inform you that you were not eligible.

Evacuating with Pets: If you require a special needs shelter and are evacuating with a pet, you will be transported to a special needs shelter where your pet(s) will be handed over to and cared for by Pinellas County Animal Services. Evacuees with pets, who only need transportation assistance and do not require a special needs shelter or medically managed facility, will be transported to a pet-friendly shelter. In these shelters, evacuees are responsible for caring for their own pets. Registrants who need transportation to a medically managed facility by ambulance will have their pets picked up by a Pinellas County Animal Services representative.

Service animals are welcome in all shelters. Registration is not required for a service animal.

For more information, please visit <u>pinellas.gov/special-needs</u> or call us at (727) 464-3800.

We strongly encourage you to sign up for **Alert Pinellas** at <u>pinellas.gov/alert</u>. Alert Pinellas provides free emergency notifications about severe weather, boil water notices, evacuations, and more.

Pinellas County Special Needs Evacuation Program Registration Form

rage | Z

		Applicant Information	n	***************************************
Eirct I	Name Las	t Name	Date of Birth [ex. mm/dd	/man/l
111361	Name Las	i Hanne	/ \	/ yyyyı
Email	Address		Phone Number [ex. (##)	###_###1
Lillali	Address		Filone Number [ex. (###)	***************************************
Stroo	t Address		Primary Language	
Stree	t Address		Filliary Language	
Ant /	Building / Lot Number City	•	Zip Code	
	☐ Single-Family ☐ Multi-Family		•	☐ Condo
	e / Residency Type	L Weblie Home	L Apartment	L condo
		Emergency Contact Inform	nation	
			() -	
First	Name Las	t Name	Phone Number	
Email	Address		Relation to Applicant	
		Shelter Needs Assessm		
1a.	Will be evacuating alone (excluding p	pets)?		☐ Yes ☐ No
	If no, how many people will be evacu			Person(s) total
2a.	Will any pets be evacuating with you			☐ Yes ☐ No
2b.	If yes, how many pets will be evacuat			Pet(s) total
3.	Do you require transportation assista		er or medically managed facility?	_
4.	Are you confined to a bed at all times			☐ Yes ☐ No
5.	Do you require the use of a wheelcha	_		☐ Yes ☐ No
6.	Do you require the use of a Hoyer Lif-		/machinery to get out of bed?	☐ Yes ☐ No
7.	Do you require the use of a Suction P		,, g	☐ Yes ☐ No
8.	Do you require the use of a Ventilator			☐ Yes ☐ No
9.	Do you require the use of a CPAP/BiP		er. External Cardiac Monitor?	☐ Yes ☐ No
10.	Have you been clinically diagnosed as			☐ Yes ☐ No
	Do you require assistance from a hom		-	
11.	medication?			☐ Yes ☐ No
12.	Do you have medication that requires	refrigeration?		☐ Yes ☐ No
13.	Do you receive dialysis treatment?			☐ Yes ☐ No
	Do you require the use of a feeding to	uhe or feeding numn?		
17.	☐ Yes and a caregiver or I can mana		require help from shelter staff to m	anage it 🗆 No
	Do you require assistance from a hon	<u> </u>		ar .
15.	colostomy bag, or ostomy bag?	ie nearth aide of medical pi	oressional to help with a cathete	"' □ Yes □ No
	Do you experience incontinence and	require assistance from a ho	ome health aide or medical	
16.	professional?			☐ Yes ☐ No
	Do you require assistance from a hom	ne health aide or medical pr	ofessional to take vour	
17	medication?			☐ Yes ☐ No
18.	Have you been diagnosed with deme	ntia or another diagnosis th	nat affects your memory?	
	☐ Yes; Moderate	_	☐ Yes; Severe	□ No
19a.	Do you require supplemental oxyger	1?		
	☐ Yes; less than 4 liters per minu		Yes; more than 4 liters per minute	□ No
19b.	If so, how much?	liters per minute (lp	·	
	Who is submitting this form to the Co			
	_	ome Health Agency	☐ Other Medical Provider	☐ Relative
21a.	Do you currently receive home health	9 1		☐ Yes ☐ No
	If so, what's the name of the agency?			
	Do you currently weigh more than 35			☐ Yes ☐ No
	Do you require wound care from a ho	-	ll professional?	☐ Yes ☐ No

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SUNDAY	AUGUST AUGUST	₹ 🛏	WEDNESDAY 2025	THURSDAY	T 9:00 am Water Walking 1:30 pm Bowling	SATURDAY 2 9:30 am Swimming Aerobics
m	4 7:00 am Golf 9:00 am Water Walking 6:30 pm Texas Hold'em	5 9:30 am Swimming Aerobics	6 9:00 am Water Walking 12:00 pm Arts and Crafts	7 9:30 am Swimming Aerobics 6:30 pm Mexican Train Dominoes 6:30 pm Texas Hold'em	8 9:00 am Water Walking 1:30 pm Bowling	9 9:30 am Swimming Aerobics
10	7.00 am Golf 7:00 am Water Walking 6:30 pm Texas Hold'em	12 9:30 am Swimming Aerobics	9:00 am Water Walking 12:00 pm Arts and Crafts	14 9:30 am Swimming Aerobics 6:30 pm Mexican Train Dominoes 6:30 pm Texas Hold'em	15 9:00 am Water Walking 1:30 pm Bowling	16 9:30 am Swimming Aerobics
17	18 7:00 am Golf 9:00 am Water Walking 6:30 pm Texas Hold'em	19 9:30 am Swimming Aerobics	20 9:00 am Water Walking 12:00 pm Arts and Crafts	21 9:30 am Swimming Aerobics 6:30 pm Mexican Train Dominoes 6:30 pm Texas Hold'em	22 9:00 am Water Walking 1:30 pm Bowling	23 9:30 am Swimming Aerobics
31	25 7:00 am Golf 9:00 am Water Walking 6:30 pm Texas Hold'em	26 9:30 am Swimming Aerobics	27 9:00 am Water Walking 12:00 pm Arts and Crafts	9:30 am Swimming Aerobics 6:30 pm Mexican Train Dominoes 6:30 pm Texas Hold'em	29 9:00 am Water Walking 1:30 pm Bowling	30 9:30 am Swimming Aerobics

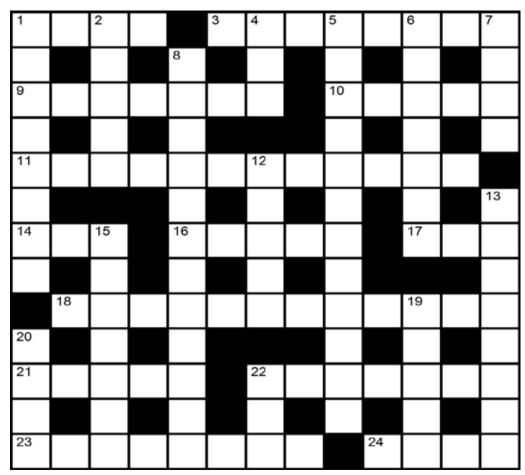
SUDOKU

3		9	8	5		4		
	2			4			8	
			6		1	3		
5				6			7	
2					4		6	
7	9			8		2		3
							5	
	8		5	1				6
		5	3					

(solution on page 17) Puzzle from https://www.printable-puzzles.com/



CROSSWORD



Puzzle compiled by Bianca Morèl

Clues:

Across

- 1 Bard
- 3 Continent
- 9 Vivid red colour
- 10 Grab
- 11 He only gets A+'s
- 14 Biblical beast
- **16** Braid
- 17 Beachgoer's goal
- **18** Locked up for good (4,8)
- 21 Be in harmony
- 22 Housework elf
- 23 Process with speed
- 24 Set aside

Down

- 1 Worn on the chest
- 2 Eagle's nest
- 4 Get older
- 5 Written thesis
- **6** Sustenance
- 7 Nostradamus, for one
- 8 Misunderstand
- 12 Give a lift
- **13** Essential
- 15 Etrier
- 19 Present
- 20 Go out with
- 22 Piece

Puzzle from https://www.printable-puzzles.com/ (solution on page 17)







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3	6	9	8	5	2	4	1	7
1	2	7	9	4	3	6	8	5
8	5	4	6	7	1	3	9	2
5	4	3	2	6	9	8	7	1
2	1	8	7	3	4	5	6	9
7	9	6	1	8	5	2	4	3
9	3	1	4	2	6	7	5	8
4	8	2	5	1	7	9	3	6
6	7	5	3	9	8	1	2	4

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CROSSWORD

SOLUTION





GUIDELINES FOR MAKING A REQUEST FOR IMPROVEMENTS. CHANGES OR ADDITIONS.

All requests to make changes, additions or alterations to or around the outside of your home must be submitted to the office for review.

This form and any accompanying paperwork must be turned into the office no less than 2 weeks prior to the start of work.

Requests must be on the front of this form which asks the following:

- 1. Written description of exactly what is to be done.
- 2. Drawing of proposed work needs to be attached.
- 3. Drawing should show position of home and any existing improvements on lot.
- 4. Description of materials to be used including style, color, etc.
- 5. Proposed construction timetable with proposed completion date.
- 6. Improvements must not infringe, restrict, impede, hinder, obstruct or be in conflict with neighbor's property, common area and set-backs.
- 7. All improvements must be consistent in color and style of existing dwelling.
- Homeowner is responsible for locating and marking underground utilities. Contact Sunshine Dig-Safe at phone number 811.
- Homeowner is responsible for any damage to neighbor's property, common areas, and all underground utilities that have been located/marked or not located/marked.

These guidelines are not inclusive of homeowner responsibilities regarding maintaining or improving your home. Please refer to the Tarpon Shores Rules and Regulations for detailed information.

Project working hours: Monday - Saturday 8 A.M. to 6 P. M. NO SUNDAYS Plumbing working hours: Monday - Thursday 8 A.M. to 2 P.M.

Tarpon Shores is not required to provide City of Tarpon Springs permits. All work that requires a permit (City or County) is the full responsibility of the homeowner and a copy of the permit must be turned into the office.

The jobsite must be kept clean and orderly. All work materials must be removed immediately following completion of the job.

Homeowner Signatu	ire:		
		A STATE OF THE PROPERTY OF THE	- Andrewson - Andr
Date:			
		~	ARC FORM.doc

TARPON SHORES RESIDENT OWNED COMMUNITY, INC.

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E-Mail: tarponshoresro@tsrop.com

REQUEST FOR IMPROVEMENTS, CHANGES OR ADDITIONS

(Please refer to pages 2 & 3 for guidelines) (Homeowner please read and **sign page 2** of this form)

Homeowner (please print)	Phone #
Address:	Date:
Description of work: (please attach a cl	ear drawing, sketch or diagram)
Section 1971 - Section 1984 - Section 1984	
Contractor's Name:	
Contractor's Phone Number:	1/2
Approximate start date:	Completion date:
Date Approved:	Signed:
Special Conditions: (Please see page 3)	
**********	*************
Data Daniad	Signed:
Reason for denial:	inglied.
Reason for delifar:	
Additional Information needed:	
Additional information needed.	

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If your home moves even a few inches during a storm your home will suffer severe damage. Loose tie downs do not protect your home, they must be tightened every 3 to 5 years. Have your tie-

downs inspected NOW, before the storms!







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CITY HELP

City Hall City of Tarpon Springs 324 East Pine Street Tarpon Springs, FL 34689

CITY COMMISSION	boc@ctsfl.us
Mayor Costa Vatikiotis	Cell# (727) 647-7625
Vice Mayor Craig Lunt	Cell# (678) 427-9064
Commissioner Jacob Karr	Cell# (727) 505-7561
Commissioner Mike Eisner	Cell# (516) 672-3958
Commissioner Panagiotis Koulias	Cell# (727) 421-3499

CITY HELP	(727) 938-3711	cityheip@ctsii.us
Building Development	(727) 942-5617	dsinfo@ctsfl.us
City Clerk & Collector	(727) 942-5614	cityclerk1@ctsfl.us
City Manager	(727) 938-3711	mlecouris@ctsfl.us
Code Enforcement	(727) 937-0017	tarponcode@tspd.us
Cultural Services & Tarpon Arts	(727) 942-5605	info@tarponarts.org
Economic Development	(727) 943-4932	klemmons@ctsfl.us
Finance	(727) 942-5612	finance@ctsfl.us
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Library	(727) 943-4922	tslibrary@ctsfl.us
Mayor & Commissioners	(727) 938-3711	boc@ctsfl.us
Planning & Zoning	(727) 942-5611	planning@ctsfl.us
Police	(727) 938-2840	reporttopd@tspd.us
Procurement Services	(727) 943-4871	purchasin@ctsfl.us
Project Administration	(727) 942-5638	projectadmin@ctsfl.us
Public Services	(727) 942-5610	publicservicesdepartment@ctsfl.us
Public Works	(727) 942-5610	publicworks@ctsfl.us
Recreation	(727) 942-5628	tarponrec@ctsfl.us
Sanitation	(727) 943-4837	sanitation@ctsfl.us
Utility Billing	(727) 942-5609	ubcts@ctsfl.us
Water & Wastewater Utilities	(727) 942-5610	publicservicesdepartment@ctsfl.us

(727) 938-3711 cityheln@ctsfl.us

Water & Wastewater Utilities After Hours Emergency (727) 234-4087 Police Department Non-Emergency (727) 938-2849 Police Department Non-Emergency Dispatch (727) 937-6151

If you have any concerns that you would like to bring to our attention, please complete this form including your name and house number and drop it off at the office in the box provided in the lobby. Thank you.

Tarpon Shores RO Association Park Concerns

Date:	Name:	
Home #:		
		_
		_
		_
		_
		_
		_
		_
below. Please complete the forn incident. Thank you.	Lawn Service Damage Forms Les with the lawn service should be submitted in writing to the office using the folion in its entirety and turn it into the office as soon as possible following your particular.	m laı
TARPON S	IORES – LAWN SERVICE DAMAGE OR COMMENT FORM	
Tarpon Shores	Date of Report:	_
89 Rachel Drive Tarpon Springs, FL 34689	Date of Damage:	_
NAME:		_
UNIT #:	PHONE #:	
	ON OF DAMAGE:	
TOOK COMMENTS ON DESCRIPTION	SIT OF BARBACE.	_
		_
		_
		_

2025 GOING AWAY FORM

TO:

ALL RESIDENTS

EMAIL ADDRESS FOR EMERGENCIES

FROM: MANAGEMENT OFFICE Please take a few minutes to fill out this form and return it to the office. If you are leaving Tarpon Shores for an extended period it is very important that we have this information updated each year. Thank you! Name(s) **Anticipated Return Date Date Leaving Tarpon Shores Address** Northern Address **Phone Number Northern Phone Number** The person who will take care of flowerbeds & weeding in my absence is: , Phone Number The person who will take care of my sprinklers in my absence is: _____, Phone Number _____ In case of emergency I have left a key with: , Phone number

The office does not hand out keys for rentals, pest control, deliveries, etc. Keys for individual unit owners are kept in the office for emergency use only.

(Please print legibly)

Please have a friend, neighbor or relative inspect the interior and exterior of your home on a regular basis and after every severe storm.

LOOKED UNDER YOUR MOBILE HOME LATELY?

Missing or torn insulation and vapor barrier can allow moisture, mold and mildew to build up, and provide access to insects and rodents into your home!

Call today for a FREE Under Home Inspection



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ESTIMATES ALWAYS FREE

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