

Unit Owner

Name

Unit No.

Phone Number

Email

Contractor

Company Name

Contact Name

Phone

Contractor Insurance Policy

Provider Name

Policy Number

I understand the Board of Directors' approval and a pre-construction meeting scheduled with a Board member and my contractor is required prior to the commencement of any work or scheduling of any delivery. Further, I understand any subsequent changes to original scope and approved plans for remodeling of Unit(s) must be reviewed and re- approved by the Board of Directors.

1. I agree to make the Unit available for inspection by the Board of Directors periodically during the project.
2. I agree to inform all neighboring units (above, below, adjacent) about this project 48 hours before the project starts by placing notes under doors that includes the proposed start and end date for the project.
3. I agree to pay any construction fines if my contractor violates the construction guidelines in this packet.
4. Finally, I agree to advise the Board of Directors in writing upon completion of the work.

I received a copy of the Belmont Harbor I Condominium Association's Remodeling Guidelines and agree to comply with all procedures and rules as outlined.

I certify the following documents are attached to this form:

- _____ Memo from Owner regarding scope of work or proposal from vendor
- _____ \$500 Construction Damage Deposit Check (Refundable)
- _____ Vendor Certificate of Insurance with required coverage limits

Signature of Owner

Date (mm/dd/yyyy)