

POLYNESIAN ASSOCIATION, INC
Change(s) to Villa Form

THIS FORM MUST BE FILLED OUT AND SUBMITTED TO THE BOARD OF DIRECTORS

Date _____

To: Board of Directors

I/We request permission to make the following change(s) at: Unit Address
_____ at Polynesian Gardens.

Unit Owners Name _____

Phone _____

1. State description of the proposed change(s):

Note: All projects must be completed within sixty (60) days. If more time is necessary because of the magnitude of the project, justification for an extension must be presented to the Board of Directors for approval. Failure to comply with a reasonable timetable will subject the owner to a daily fine.

2. Give approximate date the project will be started _____

3. Approximate date of completion _____

4. Contractor's Name _____

5. Include drawing with dimensions of the project.

6. Submit paint samples if plans include changing paint color on doors, shutters, or other trim.

7. All legal documents and permits must be obtained before proceeding with the project.

8. County Permit # _____ (if required)

9. Contractor's Certificate of Insurance _____ (if required)

10. NO WORK MAY BEGIN WITHOUT THE WRITTEN APPROVAL OF THE BOARD OF DIRECTORS.

Owner's signature _____

Date _____

Board of Director's Approval (three (3) signatures needed)

1. _____ 2. _____

3. _____

Comments

Copies to: Property Manager Property
Maintenance

Owner President of the Board

