

Only Owners, Realtors or Agents are allowed to request installation of AC unit referred to in this policy

1. This application allows for an Air Conditioner (AC) unit to be installed at lanai side of living room through window closest to stairwell side of building. It is strongly recommended that installation be made in a professional, workmanlike manner that is aesthetically pleasing by a LICENSED CONTRACTOR and if you are not unit owner or realtor then you must get written permission to proceed with such installation.
2. Installation of AC unit must conform to standards listed below which have been adopted by Board of Directors and are contained in this policy. Failure to comply may result in legal action which shall require owner and or occupant to remove AC at own expense. You are responsible for installation of your AC, our staff will not install.
3. Please complete attached forms: Construction Renovation Form (CRF) & Release of Liability Form.
4. Once you submit completed CRF & Release of Liability Form then you must pay (2) fees: \$35.00 to install drip line & \$140.00 to fabricate and install AC cover. All payment in the form of check / money order only and All work done by our in-house maintenance staff. We will schedule all work directly with you and coordinate accordingly.
5. AC unit must be equipped with drainage tube/hose to prevent staining or damage to exterior of building. This also applies to AC units sold as "drip less". This drainage tube/hose should be attached or routed to drain line installed (as listed above).
6. A grounded single use outlet must be utilized with its circuit capable of handling amperage equal to or greater than the maximum amperage of AC unit. If AC unit requires amperage greater than 110 volts, a LICENSED ELECTRICIAN must install.
7. The back of AC unit may protrude beyond flush of building. AC unit must be supported by brackets, braces or supports secured from **INSIDE of unit** and NO screws or fasteners are to penetrate **exterior wall**.
8. AC unit must be screened from view with cover constructed to match exact covers enclosing AC units at MVP Office. White lattice **MUST** be used and lattice squares **MUST** be one (1) inch by one (1) inch (1"x1"). Corners of covers **MUST** be rounded in appearance. Fabricated cover must be inspected by MVP Management Office before installing. MVP Management Office can provide touch up paint for this cover (should match wooden louvers or exterior wall of bldg.) just bring a small jar, bowl or container and we will be happy to have them filled for you. (Sample picture attached)
9. Condensation is NOT allowed to drip down building or onto any other unit deck or common area exterior.
10. AC unit must be kept in proper working order and remain in acceptable appearance.
11. Apartment owners are responsible for any damages to building or common areas resulting from AC use.

For Office Use Only

Installation of Drain Line

Date of Request: _____

MR #: _____

Date of Completion: _____

\$35.00 paid: _____ (MVP initial)

Installation of AC Cover

Date of Request: _____

MR #: _____

Date of Completion: _____

\$140.00 paid: _____ (MVP initial)

UNIT # _____

CONSTRUCTION / RENOVATION / REPAIRS OF APARTMENTS

The construction or renovation of any apartment unit must be done only by a properly licensed contractor, who carries all necessary insurance policies.

Prior to START of any renovation / construction, the following rules must be followed:

This form must be submitted with the plans or drawings detailing the work to be done. The form and plans, once submitted, will be reviewed by the Board of Directors.

A copy of the building permit must be provided to the General Manager prior to any construction for all work requiring some electrical, plumbing or structural renovations / modification

D13. Bulk Refuse Collection, to remove the items from an off property location. All cartons and boxes must be flattened before placement in dumpsters. All contractors or vendors providing renovation services to any unit shall remove and dispose of all materials off property. The dumpster shall not be used for these purposes. Failure to comply with the bulk refuse removal shall result in a one hundred dollar (\$100) fine.

F2. Occupant's contractors and MVP personnel making repairs or alterations need to be considerate of occupants and neighbors. Performing repairs or maintenance to apartments (except emergency repairs), buildings or grounds shall not be allowed on MVP property before 8:00 a.m. and shall cease by 7:00 p.m., Monday through Friday. Saturdays and Sunday 10:00 a.m. to 4:00 p.m., except in emergencies. Emergency repairs shall not be limited by these restrictions on any day and time.

G1. No structural changes of any type shall be permitted either within or without an apartment without prior written approval of the Board of Directors.

G2. No alterations or, installations, including and not limited to telephone lines, radio and TV cables, disks or microwave/infra dishes, or changes of any nature shall be made to the exterior surfaces of the buildings or the common elements, nor shall window guards, awnings, shades or tinting be installed unless approved in writing by the Board.

Specify in detail type of Construction: (Plans and or drawings to accompany application)

Is / Are Person(s) licensed to perform work? _____ If yes, Lic. State & # _____
If no, must sign release of liability form on next page

X _____
Print Name of Requestor

X _____
Signature of Requestor

Start date of construction / renovation / repairs: _____ End date: _____



84-786 Aja Mahiku Drive, ~ Waianae, HI 96792
Phone: (808) 695-9566 ~ Fax: (808) 695-7217
Email: mvnqm@hawaii.rr.com

CONSTRUCTION APPLICATION

UNIT NUMBER _____

DATE SUBMITTED: _____

OWNER INFORMATION:

NAME:

LAST NAME FIRST NAME M.I.

ADDRESS:

ADDRESS CITY STATE ZIP

PHONE:

BUSINESS / HOME CELL FAX

E-MAIL

AGENT INFORMATION:

COMPANY NAME

NAME:

LAST NAME FIRST NAME M.I.

ADDRESS:

ADDRESS CITY STATE ZIP

PHONE:

BUSINESS / HOME CELL FAX

E-MAIL

CONTRACTOR'S INFORMATION:

NAME:

COMPANY NAME CONTACT NAME Lic. #

ADDRESS:

ADDRESS CITY STATE ZIP

PHONE:

BUSINESS / HOME CELL FAX E-MAIL



RELEASE OF LIABILITY FORM

As the owner / agent of Unit # _____, I am signing this release in agreement that neither Makaha Valley Plantation nor Hawaii First will be held responsible should any incidents occur with my request for construction, renovation, and or repairs being done in my unit. I understand that by signing this, I am taking FULL RESPONSIBILITY for work being done in unit associated with this request.

X _____
PRINT NAME (owner / agent)

X _____
SIGNATURE (owner / agent)

DATE

OFFICE USE ONLY

X _____
Office Staff Signature

X _____
General Manager Approval

Date