

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 any interior 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. **No structural changes of any type shall be permitted either within or without an apartment without prior written approval of 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. 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)

WILL THERE BE ANY STRONG CHEMICAL ODOR USED IN THE WORK LISTED ABOVE _____

Is / Are Person(s) licensed to perform work? _____ If yes, Lic. State & # _____

X _____ X _____
Print Name of Requestor Signature of Requestor

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



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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 Touchstone Properties 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)

X _____
SIGNATURE (owner / agent)

DATE

OFFICE USE ONLY

X _____
Office Staff Signature

X _____
General Manager Approval

Date