Site Improvement Request Form

NO WORK can be done on any site without this form being submitted and approved by the Site Improvement Committee. You may email your request to president@portdelmarva.com, as well as submit the form to a Board Member in person or drop it at the mailbox at the Port Office. The Board will make every effort to return the form in a timely manner. However, there is no time limit on how long the board may take to make their final decision.

SITE#				
1. Description of wor	k being requested:			
2. Detailed drawing of	work placed on the rear of thi	s application.		
3. Who will be doing the work?				
insurance and liabilit contractors are instru Should you not have	is being done by a contractor ty insurance by the contractor ucted NOT to begin work un the form at the time the wor y responsible for the contrac	or. You must also sh less the Form is sign k is supposed to beg	now this approved fo ned and approved by	rm to the contractor. All the Board Of Directors.
4. Start date:	Completion Date:			
5. This form must be p	posted at site during work dates	S.		
(All parties on license	must sign this form)			
Licensee(s)				
Print Name	Signature		Date	
Print Name	Signature		Date	_
Site Holders Phone	e Number:			
Approval consists of	2 Board Members as well as	the President of the	Board.	
1		Date		
2		Date		
President		Date		
Inspection :	after completion - Board		Date	