## HARBOR OAKS HOMEOWNER ASSOCIATION

REQUEST FOR MODIFICATION OR RENOVATION

## Harbor Oaks Homeowner's Association

Please complete then email, mail or fax back to the Harbor Oaks' Management Representative listed below:

1080 Saint Joseph St. 7G, Carolina Beach, NC 28428

Phone: 910/636-3088

Contact: Shelley Steele - shelley@harboroaksassociation.com (910-636-3088)

UNIT NUMBER:NAME:	OWNER		
			CELL NUMBER:
MAILING ADDRESS:			
(If Different)			
PROPOSED MODIFICA	TION / RENOVATION DAT	ΓE:	
ESTIMATED TIMEFRAI	ME FOR COMPLETION:		
DESCRIPTION OF PROJECT: (Additional Space on Back			
CONTRACTOR(S) NAME AND ADDRESS, PHONE, EMAIL, CONTACT PERSON: (Additional Space on Back)			
By submitting this form, Unit Owner accepts full responsibility for compliance with all covenants and rules of the Association and all necessary corrections			
of the proposed improvements which are not in compliance when work is done. Unit Owner also acknowledges that persons performing modification and/or renovation will receive a copy of the "Rules for Contractors, Workers and Movers" and insure that these rules are followed.  Unit owner is solely responsible for securing proper approvals and permits from local government, and all construction must meet current building			
No activity should begin without prior Board approval and local government permits and approvals. Construction should commence within 60 days of approval or approval will be deemed void. Unit owner must advise management representative at least 24 hours in advance of work commencement.			
NAME:			DATE:
(Print)			
SIGNATURE:			
APPROVED	NOT APPROVED		
SIGNATURE:		TITLE:	DATE: