

APPLICATION FOR BUILDING MODIFICATIONS

Proposed work to be reviewed by the Physical Properties Department for the purpose of providing continuity throughout the Leisure World Community and guidance to the Mutual Boards of Directors by ensuring a high level of quality for all construction projects.

IMPORTANT: DO NOT ENTER INTO ANY SIGNED CONTRACT WITH ANY CONTRACTOR OR GIVE ANY CONTRACTOR ANY DEPOSIT MONEY UNTIL YOUR APPLICATION FOR BUILDING MODIFICATIONS HAS BEEN APPROVED BY YOUR MUTUAL BOARD OF DIRECTORS IN WRITING. THIS APPLICATION IS GOOD FOR ONLY 180 DAYS. FAILURE TO START WORK DURING THAT TIME WILL RESULT IN HAVING TO RE-SUBMIT THE APPLICATION. UNIT OWNER MUST CALL PPD 48 HOURS PRIOR TO THE START OF ANY CONSTRUCTION WORK AT 301-598-1317.

NAME (Include co-members): _____
ADDRESS: _____
PHONE: _____
MUTUAL #: _____ BLDG. & APT. #: _____ BUILDING TYPE: _____

For office use only Date received _____

TYPE OF ALTERATION:

- | | | |
|--|---|--------------------------------------|
| <input type="checkbox"/> Fence | <input type="checkbox"/> Shed | <input type="checkbox"/> Window/Door |
| <input type="checkbox"/> Lighting/Electrical | <input type="checkbox"/> Storm/Front Door | <input type="checkbox"/> Hand Rail |
| <input type="checkbox"/> Florida Room/Addition | <input type="checkbox"/> Patio/Atrium Enclosure | <input type="checkbox"/> Other |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Bonus Room | |
- (conversion of garage space)

*** RESIDENT MUST PROVIDE U-FACTOR IF INSTALLING NEW WINDOWS AND DOORS. THIS INFORMATION WILL BE FORWARDED TO THE ENERGY COMMITTEE FOR A NEW E-RATING, WHEN APPLICABLE. IT IS THE RESPONSIBILITY OF THE MUTUAL AND RESIDENT TO NOTIFY THE ENERGY COMMITTEE UPON COMPLETION OF PROJECT. THE U-FACTOR STICKERS MUST BE LEFT ON THE NEW WINDOWS SO THE ENERGY COMMITTEE CAN DETERMINE THE U VALUE WHEN ADJUSTING THE E-RATINGS.**

Provide a detailed description of the proposed work. Indicate by attaching a SKETCH, DRAWING, MATERIAL CATALOG, AND/OR DETAILED TYPED DESCRIPTION of the proposed modifications. Refer to your Mutual Bylaws, rules and regulations to see if the proposed work is allowable BEFORE submitting this application form for approval. Kindly include information regarding the Contractor (if other than PPD) performing the work as follows: **Copy of Contractor's State/County license; contact name and phone #; copy of current Certificate of Insurance; and any applicable permits that are required. Note: Certificate of insurance must name the unit owner, the Mutual and LWCC as additional insured.** Applications received without the above information will be returned.

Work to be performed by: _____
NAME OF CONTRACTOR
MD license # _____

I/We hereby agree that the cost of all labor, equipment and materials involved in this proposed work, including painting, planting, care and maintenance, as well as all restoration, if necessary, shall be at my/our cost and expense and in accordance with the attached plan. I/We will save Leisure World of Maryland Corporation harmless by employing only Contractors who furnish a Liability Insurance Certificate to the Physical Properties Department and agree to adhere to all applicable regulations established for Contractors operating within Leisure World. I/We understand that any additional future maintenance expense caused by the above requested alteration will be billed to us/me directly.

SIGNED (resident member) _____	DATE: _____
Neighbor Approval _____	DATE: _____
(Three required) _____	DATE: _____
_____	DATE: _____

