**Application for Project Approval** (Submit to KDM Management Inc.)

**Erin Ridge Active Adult Living Homeowners’ Association**

Submission Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Homeowner Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work to be done by: Self \_\_\_\_ or Contractor \_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expected Completion Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Summary: Project Description (Attach project information as necessary)

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For office use only

Date received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approval Level: Level 2 Level 3 Level 4

Approved By \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City permits required: Yes \_\_\_\_\_ No \_\_\_\_\_

This Approval is subject to the conditions specified on next page.

Completion Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Inspected by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_

**This approval is subject to the conditions as checked off below:**

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|  | The project is to be completed using the design and materials specified in the Application for Project Approval. |
|  | The tree/shrub is to be removed and grass seed placed to restore the area to lawn. |
|  | The tree/shrub is to be removed and replaced with a new tree/shrub as specified in the Application for Project Approval. |
|  | Erin Ridge Active Adult Living Homeowners' Association does not assume any responsibility for maintenance of the modification. |
|  | Your heirs, rights and assigns are to be made aware of their responsibility as it pertains to the repair and maintenance of the modification. |
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**November 2021**