

APPLICATION FOR GENERAL INSTALLATION/ALTERATION

NAME _____ UNIT # _____ DATE _____

ADDRESS _____ LOT # _____ PHONE _____

TYPE OF INSTALLATION/ALTERATION (** Indicates that a City Permit is required)

- | | |
|----------------------------------|-------------------------------------|
| _____ Air Cleaner ** | _____ Floor Covering, Over Hardwood |
| _____ Air Conditioning ** | _____ Humidifier, Furnace Mounted** |
| _____ Basement Bathroom ** | _____ Microwave, Built-in ** |
| _____ Cabinets, Full Bath Vanity | _____ Patio Steps |
| _____ Cabinets, Half Bath Vanity | _____ Patio, Poured Concrete** |
| _____ Cabinets, Kitchen | _____ Porch Light Replacement |
| _____ Dishwasher, Built-in ** | _____ Privacy Dividers |
| _____ Door Wall Replacement | _____ Railings, Patio Steps |
| _____ Doors, Exterior Storm | _____ Railings, Porch |
| _____ Doors, Interior | _____ Walkway, Poured Concrete** |
| _____ Electrical Outlets ** | _____ Window Replacement, Block |
| (Ceiling Fan, Fixtures, Etc.) | |
| _____ Floor Covering, Basement | |
| _____ Floor Covering, Over Tile | |

DETAILS OF INSTALLATION/ALTERATION _____

ESTIMATED COST OF ALTERATION/INSTALLATION? _____

WORK WILL BE PERFORMED BY _____

REPAIR, MAINTENANCE AND/OR REMOVAL PERFORMED BY _____

NOTE: This Permit is subject to all requirements of the By-Laws, Occupancy Agreement and Building Codes applicable to Holliday Park Towne Houses by the City of Westland. This Permit in no way relieves the tenant of any liability pertaining to this Installation/Alteration and the Holliday Park Cooperative assumes no responsibility from said improvements. I understand that I, or my successors shall be responsible for future repair, maintenance and/or removal unless specifically noted in policy.

Member Signature _____

	BY	DATE
Granted:	_____	_____
Denied:	_____	_____
Approved:		

Date Installed _____
Authorized Value \$ _____
Improvement Committee Signature _____