

## Application for Approval to Renovate or Remodel Apartment # \_\_\_\_\_

Owners may make desired modification, alteration, renovation or remodeling of apartments only after the review and processing of this application. If an emergency repair is needed, contact the Manager immediately. All other work will fall into one of three categories.

Category A: Plan of work may proceed after coordination with Resident Manager.

Category B: Plan of work will be reviewed by the Evaluation Committee, and by the Board as needed.

Category C: Plan of work in all instances requires Board approval and applicable documents such as, but not limited to, architectural or engineering plans, and Honolulu City and/or County building permits as required.

Major changes or additions which could possibly affect the building or other residents, if approved, **will require an Indemnification Agreement from the owner or record which will be recorded at the Bureau of Conveyances and will run with the lease or deed.** Two copies of the following items are required for review by the Manager, the Evaluation Committee, and/or the Board of Directors.

1. Plans for the proposed renovation or remodeling. The minimum requirement is submittal of a basic floor plan marked to show proposed changes in the apartment. A floor plan is available from the Manager's office.

2. A written description of the proposed changes. Include the particulars of any additional fixture, equipment or appliance to be installed. Include the weight, size (length, width & height) and any noise producing element of the item. No floor loading greater than 40 lbs/ft<sup>2</sup> can be imposed at any point in the building.

3. Proposed floor covering materials should be indicated on the submitted plans. Floor coverings for areas originally covered by carpets (hallway, entry, living room, dining room and bedrooms) must be replaced with carpet of equal or better quality and kind. The installation of any floor covering other than carpet represents an exception of the House Rules and, if approved, must achieve 58 IIC (Impact Insulation Class) for tile and 59 IIC for hardwood flooring. An Indemnification Agreement is usually required. See III. *Maintenance, Modification and Renovation Guidelines, Category B, §7 and Exhibit 2* for details.

4. If any common area (structural element, plumbing, piping ventilation shaft or exterior wall of the building) is to be fastened to or changed in any way, this must be noted explicitly in the plans. See III. *Maintenance, Modification and Renovation Guidelines, Category C, §1 through §8*; and IV. *Architectural Guidelines and Approved Modifications, General Comments* for details.

5. Is a building permit required? YES ☐ NO ☐ If yes, have you applied? YES ☐ NO ☐

6. Estimated start date \_\_\_\_\_ Estimated Completion date \_\_\_\_\_

7. Will any of the planned modifications include changes to existing:

Plumbing:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Electrical:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Mechanical:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Structural:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

If any of the above questions are answered "YES", you will be required to submit plans and specifications prepared by a registered architect (or professional engineer if permitted by the Board) showing details of the proposed work. You will also be required to submit the name of the licensed contractor(s) who you intend to employ for the work and such other information as may be required by the Board. Even if you answer "NO" to each of the questions above, the Board may require plans and specifications and other information from you before deciding upon your application.

8. General description of intended alterations and/or additions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. List of Contractors, Engineers, and/or Architects:

**Name:** \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

License #: \_\_\_\_\_ License Type: \_\_\_\_\_

**Name:** \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

License #: \_\_\_\_\_ License Type: \_\_\_\_\_

**Name:** \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

License #: \_\_\_\_\_ License Type: \_\_\_\_\_

(Continue on separate sheet, if needed)

10. Notice of approval to proceed with the work will come from the Resident Manager, who will also inspect the work upon completion. See V. *Procedures for Approval*, §B (3) for details.

11. I/We, the undersigned hereby request that the 1717 Ala Wai Board of Directors approve the alterations and/or additions described above and on any accompanying plans, specifications, or drawings. I/We hereby acknowledge receipt of a copy of the 1717 Ala Wai Maintenance, Modification and Renovation Policy Manual. I/We acknowledge and agree that any approval given by the Board of Directors shall be conditioned upon all work conforming to all applicable building and zoning laws, ordinances, and rules and regulations and all other conditions established by the Board. I/We agree to periodic inspections during the renovation work by the Resident Manager and/or representatives of the Board of Directors. I/We agree that all noise generating work shall be accomplished during normal working hours which are Monday through Friday from 8:00 AM to 4:30 PM only. I/We understand that no work is to be done in the common areas and further agree to pay for the repair of any damage to or the cleaning of the common areas needed as a result of this renovation and/or remodeling activity.

Owner's Signature: \_\_\_\_\_ Apt # \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

Received by Resident Manager's Office:

Date: \_\_\_\_\_ By: \_\_\_\_\_

**For Committee Use Only:**

Apartment # \_\_\_\_\_

Date Application Received \_\_\_\_\_ Date Reviewed \_\_\_\_\_

Indemnification Agreement Required: YES      NO

Approved by Evaluation Committee      By: \_\_\_\_\_, Chairperson

Approved with Conditions      By: \_\_\_\_\_, Chairperson

Declined by Evaluation Committee      By: \_\_\_\_\_, Chairperson

Reason for Declination and/or Additional Requirements/Conditions: \_\_\_\_\_

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**Board of Directors Action:**

Date Application Received \_\_\_\_\_ Date Reviewed \_\_\_\_\_

Indemnification Agreement Required: YES ☐      NO ☐

Approved by Board of Directors      By: \_\_\_\_\_, President

Approved with Conditions      By: \_\_\_\_\_, President

Declined by Board of Directors      By: \_\_\_\_\_, President

Reason for Declination and/or Additional Requirements/Conditions: \_\_\_\_\_

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Board Signatures (5 Required): \_\_\_\_\_; \_\_\_\_\_; \_\_\_\_\_; \_\_\_\_\_;

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