

SIMBA RUN CONDOMINIUMS INTERIOR REMODEL FORM

Date of Submittal: _____

Name of Owner(s): _____

Unit #: _____

Primary Contact: _____
(Circle One: Representative, Contractor, or Owner)

Phone #: _____

Email Address: _____

Contractor Information

Company Name: _____

Contact: _____

Phone: _____

Email: _____

Contractor Insurance Information

Insurance Carrier General Liability: _____

Insurance Carrier Business Auto: _____

Insurance Carrier Umbrella: _____

Insurance Carrier Workers Comp: _____

* attach updated/current certificate of insurance showing all carriers/policy numbers and effective dates*

* if using **subcontractors** on project- attach certificate of insurance showing same info from sub and*

***executed risk transfer agreement** between contractor and subcontractor*

Description of Project:

Start Date: _____

Estimated Completion Date: _____

Scope of Work: _____

Town of Vail Building Permit #, if applicable:

Conditions: I hereby agree to abide by the following Conditions based upon the Rules and Regulations of the Simba Run Condominium Association (please initial each item below):

_____ No construction debris may be deposited into the Simba Run dumpsters. My contractor will haul off debris daily by use of a truck.

_____ I agree not to drill any holes in the exterior walls, sills or headers, nor attach any wires or cables to the exterior of any building. Any exterior wall changes, including vents and caps must receive PRIOR BOARD APPROVAL before construction commences.

_____ I understand that contractors', subcontractors' and any employees' ("workers") vehicles must be parked inside the garage in my assigned spot. Guest parking spots may NOT be used by workers. I understand that parking for workers for my project may need to occur off site and workers may need to be shuttled to the job site.

_____ Any damage to Common Areas as a result of my Project and caused by my employees, contractors, subcontractors, inspectors or any other persons that come to Potato Patch for the purpose of my Project will be my responsibility to repair or replace at my own expense.

_____ I understand that no contractors, subcontractors or employees may use the bathroom facilities in Simba Run common areas and that I must provide bathroom facilities inside of my unit or obtain association permission for a temporary, portable toilet (location to be determined).

_____ I agree to abide by Reasonable Work Hours: Monday through Friday 8AM to 6PM, Saturday 9AM to 5PM. NO WORK ON SUNDAYS. NO WORK ON HOLIDAYS (ie: Memorial Day, Labor Day, Thanksgiving, Christmas, New Years, MLK's Birthday, President' Day, Easter, etc.).

_____ I understand that violation of any above the above Rules will result in fines according to the Rules & Regulations and the Policies & Procedures of the Association.

Please notify your neighbors of any work that that is planned. Thank you.

Signature of Owner: _____ Date: _____

Signature of General Contractor: _____ Date: _____