

Appendix B Inspection Request/ Project Completion Form for AC Application

This form will assist Klahanie in ensuring that projects are completed as approved by the Association, and those that are delayed or postponed will reflect the change in status in our records. Include photos showing project completion. Photos may be attached to the following page or emailed to architecturalcontrols@klahanie.com.

Please submit this form when:

- Your project is completed, OR
- You have decided to cancel the project, OR
- It has been ninety (90) days since the project was approved and it is not yet completed and requires an extension.
- **\$100 fine will be levied if the form is not returned within ninety (90) days after approval is given.**

COMPLETE THIS SECTION IF YOUR PROJECT HAS BEEN COMPLETED

NAME: _____

ADDRESS: _____

DIVISION: _____ LOT #: _____ PHONE #: _____ EMAIL: _____

ARCHITECTURAL CONTROLS PERMIT # (from your approved application form or letter): _____

PROJECT COMPLETION DATE: _____ TYPE OF PROJECT: _____

IF APPLICABLE PLEASE FILL OUT THE FOLLOWING INFORMATION

ROOF PROJECT: Name of product: _____ Color _____

EXTERIOR PAINTING:

body color name: _____ body color number: _____

trim color name: _____ trim color number: _____

front door color name: _____ front door color number: _____

garage door color name: _____ garage door color number: _____

TREE REMOVAL: name of replacement tree: _____ location of tree: _____

OTHER (please describe): _____



PLACE PHOTO(S) HERE
(or submit as email attachment to architecturalcontrols@klahanie.com)

COMPLETE THIS SECTION IF YOUR PROJECT IS PAST THE NINETY (90) DAY APPROVAL AND EXTENSION IS
REQUESTED OR PROJECT IS CANCELLED

NAME: _____

ADDRESS: _____

DIVISION: _____ LOT #: _____ PHONE #: _____

ARCHITECTURAL CONTROLS PERMIT # (from your approved application form or letter): _____

☐ PROJECT HAS BEEN CANCELLED

☐ PROJECT IS PAST ITS NINETY (90) DAY APPROVAL AND REQUIRES AN EXTENSION OF _____ DAYS

PRINTED NAME OF PROPERTY OWNER: _____

SIGNATURE: **X** _____ DATE: _____

FOR KLAHANIE OFFICE USE ONLY — PLEASE DO NOT MARK THIS AREA

PROJECT COMPLETED AS SUBMITTED?

☐

YES

☐

NO

DATE OF COMPLETION: _____ INITIALS: _____

COMMENTS: _____

