

**WAILEA EKAHI AOO
APARTMENT ALTERATIONS MANUAL
SECTION F: -FORMS & REFERENCES**

2. NOTICE OF INTENT TO ALTER APARTMENT FORM

Date: _____

Apartment No.: _____

Owner Name: _____ Tel. No. _____

General Manager:

I (We) hereby give notice of our intention to alter my (our) apartment.

I (We) understand that alterations cannot be commenced until appropriate approvals have been received.

I (We) also understand that all alterations must comply with the provisions of the Wailea Ekahi Association of Apartment Owners' Apartment Alterations Manual.

____ Preliminary drawing of proposed changes attached, if required.

(Signed)

Apartment Owner:

I have received your Notice of Intent to Alter Apartment and have delivered to you a copy of the Wailea Ekahi Association of Apartment Owners' Apartment Alterations Manual.

General Manager

Date

Form AM2