

## Homeowner Architectural Application Indemnity/Liability Agreement

**Owners Name:** \_\_\_\_\_  
(Please print)

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Day Time Contact Number:** \_\_\_\_\_ **Evening:** \_\_\_\_\_

I, (we), the above named owner, request approval to make the following addition, change, or alteration on my home at the address listed above:

**Description of addition, change, or alteration:** (include as much information as possible; use additional page if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Who will perform the work?** (Attach a copy of the contractor's current license and current insurance information)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Plans and/or specifications, (drawings), showing nature, kind, shape, height, and materials, must be submitted as a part of this request.**

I, (we), the above named owner will be responsible for damage to the exterior of the building that may arise as a result of the above stated addition, change, or alteration, and will be responsible for maintenance of same. I agree to obtain and produce copies of all necessary City permits to the Association. It is also agreed that any necessary insurance coverage for the protection of these additions will be the sole responsibility of the owner(s). Further, owner(s) agree that if and when this unit is sold, this agreement must be included as apart of the sale and agreed to by the new owner(s). After the sale is complete, it will be the OBLIGATION of the new owner(s) to sign a new copy of this agreement and deliver it to the Secretary of the Association so that it will be on file whenever needed. This will apply to ALL subsequent owners, and will be disclosed to any potential buyers of the property.

It is recognized by me that the Association maintains the right of approval of the above stated addition, change, or alteration and may require its removal, should it become necessary for safety, maintenance of surrounding structures, or lack of proper maintenance by the above named owner.

**The above named owner agrees to hold the Association, its Board of Directors, members, employees and agents harmless from any liability, injury, damage, or costs that may be incurred as a result of the above stated addition, change, or alteration.**

Permits:(Please attach any City Building Permits required and list those being attached):

---

---

---

Applicant agrees and understands that the submission of this form alone does not necessarily fulfill all requirements for approval. Committee and/or Board may require additional information in order to make a decision. Until all information has been received, the application stands disapproved.

Applicant,(Homeowner) understands that if the committee requires modifications to plans, special conditions may be placed on the completion of work.

Applicant understands that failure to receive City of \_\_\_\_\_ approval where necessary, and/or committee approval, constitutes automatic authorization by the applicant to the Association to have the work brought in to conformance with the approved plans, specifications, and special requirements at the complete expense of the applicant/homeowner.

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Signature of owner (applicant)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Signature of owner (applicant)**

\_\_\_\_\_  
**Date**

If you have any questions about this form please, contact our office. Mail or fax your application to:

**The Manor Association, Inc.**  
**353 Main Street**  
**Redwood City**  
**Office: 650-637-1616**  
**Fax: 650-637-1670**

**For Office Use Only**

**Date application received by Manor Association:** \_\_\_\_\_

**Date of Architectural Committee review:** \_\_\_\_\_

**Board of Directors/Architectural Review Committee:**  **Approved**       **Denied**

**Special conditions for approval:** \_\_\_\_\_

\_\_\_\_\_

**Date approved to proceed:** \_\_\_\_\_

**Building permit required:**  **Yes**       **No**

**Reason for denial:** \_\_\_\_\_

\_\_\_\_\_

**By:** \_\_\_\_\_

\_\_\_\_\_

**Authorized Association Representative**

\_\_\_\_\_

**Date**