

Canal Walk Homeowners Association

Property Modification Request

This PMR form is to be used to apply for approval from the Covenants Committee for landscaping and exterior architectural modifications to your home. The requirements for these and other modifications can be found in Section VII of the April 2019 edition of the Canal Walk HOA Rules and Regulations. A special PMR form must be used for solar collector systems, emergency generators and decks.

Project Description: _____

Projected completion time _____

The following documentation must be attached to this PMR for it to be considered for approval:

1. Description of landscaping (including types of shrubs/trees) or other architectural modification.
2. Drawing of landscaping or other modification on 8 ½" x 11" paper. If applicable, copy of manufacturer's brochure depicting proposed storm door, sliding door, window and/or awning.
3. Property survey indicating that landscaping (including edge of mulch beds), patio expansion, paver enhancements and/or other modifications are at least 3' from each property line.
4. Contractor's NJ Home Improvement License. **(Non-licensed contractors subject to expulsion.)**
5. Contractor's liability insurance certificate in the minimum amount of \$1 million that **names Canal Walk HOA as one of the insured entities in addition to the homeowner.** See sample on reverse side.

Homeowner confirms that Items 1 - 5 above are attached: _____ Yes _____ No (PMR will be denied)

Items 4 and 5 not required if work is performed by homeowner. Work by homeowner: Yes: _____ No: _____

Homeowner's signature below confirms that homeowner is responsible for:

- Damage to irrigation systems and buried electrical, telephone and cable lines.
- Obtaining all required permits from Franklin Township.
- Submitting copies of Township permits to Community Manager prior to commencement of work.
- Notifying Covenants Committee that work has been completed so an inspection can be scheduled.
- Ensuring that contractor removes all excess material from owner's lot and the community.
- *No dumping allowed in Canal Walk's common areas or in builder's construction dumpsters.*

PLEASE NOTE: YOU MUST RECEIVE WRITTEN APPROVAL FROM THE COVENANTS COMMITTEE BEFORE WORK CAN COMMENCE.

Signature below authorizes the Covenants Committee to visit the property to inspect the completed modification to determine conformance with the Canal Walk HOA Rules and Regulations.

Signed: _____ Date: _____

Print Name: _____ Email: _____

Address: _____ Model: _____

Phone: _____ Cell: _____

*** PLEASE NOTE***

The Covenants Committee meets on the **third Tuesday of each month.**

PMRs must be submitted no later than the second Tuesday of the month.

→→→🏠 Management Office will contact all applicants by Friday of the same week with results. 🏠←←←

Update: Dec. 2020

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/07/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

CONTACT NAME: PHONE (A/C, No, Ext) E-MAIL ADDRESS:

SAMPLE

FAX (A/C, No):

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : Selective Insurance Company of America

12572

INSURER B : Wesco Insurance Company

25011

INSURER C :

INSURED

SAMPLE

COVERAGES

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY REVISIONS THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN TO EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

NAMED ABOVE FOR THE POLICY PERIOD SUBJECT TO ALL THE TERMS,

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL SUBR INSR WVD, LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, and Workers Compensation and Employers' Liability.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

are included as additional insured for General Liability for work performed by the captioned insured, if required by written, executed contract, subject to the terms & conditions of the policy.

The homeowner's name and complete address goes in this area. Canal Walk's information belongs below. Your contractor's insurance company must get this information for you. Anything hand written WILL NOT be accepted.

CERTIFICATE HOLDER

CANCELLATION

Canal Walk Homeowners Association 100 Canal Walk Blvd. Somerset, NJ 08873

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Ull Scott

SAMPLE