Holiday Harbour Condominium Variance Request Form

Submission of Plans to Board of Managers (BOM) or Variance Committee (VC)

Review and decision by VC and/or BOM may take up to 30 days from date of receipt

Homeowner:		Holiday Harbour Unit #:
Mailing Address:		
City/State/Zip:		
Phone(s) Cell: Home/Other:		ome/Other:
Email Address:		
		Date Received by VC/BOM:
My Check List. Please	e ck each item below to indicate	e items are included.
	awing (to scale) or blueprint of or is:	• •
		ith a detailed description of the work to be
	•	res, cut sheets, specs on product). ng General liability insurance coverage in the
	,000,000 & workers comp insura *Must Submit with Each Applica	ance in effect currently and at the time the work is to
		nt furnaces & on-demand hot water tanks.
and liens ("declaration &	& by-laws") and the condominiւ	or Condominium covenants, easements, charges, um rules and regulations, I request approval to additions and/or removals to my unit:
I understand that under th	e Declaration and Rules and Reg	es, approximate date of previous request: ulations, the committee will act on this request and er understand and agree to the following provisions:

- I will submit the variance and supporting documents to the Kenrick office at least one week prior to the Holiday Harbour Board of Managers meeting. They may be emailed to: variances@kenrickfirst.com or mailed to 3495 Winton Place D4, Rochester, NY 14623. If the variance is not received prior to the meeting, it will not be reviewed until the next month's meeting.
- No work or commitment of work will be made by me until I have received written approval from the Variance Committee (VC) and/or Board of Managers (BOM).
- All work will be done at my expense and all future upkeep will remain at my expense or future homeowner's
 expense. All work will be done expeditiously once commenced and will be done in a good workman-like
 manner by contractor.

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- All work will be performed at a time and in a manner to minimize interference and inconvenience to other unit
 owners.
- I assume all liability and will be responsible for all damage and/or injury which may result from performance of
 this work and be responsible for the conduct of all persons, agents, contractors, and employees who are
 connected with this work.
- I will be responsible for complying with, and will comply with, all applicable federal, state, and local laws; codes; regulations; and requirements in connection with this work, and I will obtain any necessary governmental permits and approvals for the work. I understand and agree that Holiday Harbour Condominium, its Board of Managers, its Agent, and the Variance Committee have no responsibility with respect to such compliance and that the Board of Managers or its designated committee's approval of this request shall not be understood as the making of any representation or warranty that the plans, specifications, or work comply with any law, code, regulation, or governmental requirement.

or work comply with any law, code, regulation, or governmental requiremen	it.	
 I understand that a decision by the Variance Committee (VC) is not final an (BOM) may reverse or modify a decision by the Variance Committee (VC) owner made to the Board within thirty (30) days after the committee makes 	upon the written applicati	
 If approved within thirty (30) days of application, the work would start on or would be completed on or about 	about	and
 Homeowner agrees to notify on-site Superintendent when work is complete required for all variances. Homeowner's initials: 	ed so it can be reviewed.	This is
Homeowner's Signature:		_
Action taken by Board of Managers or Variance Committee		
Date of Action:		
Approved as Requested		
Approved with the Following Exceptions		
Permit Needed:		
Disapproved Based on The Following:		
Any work not started on or beforelater construction must be subject to re-submittal to the committee.	is not app	roved and
Signature	Date	
Holiday Harbour Condominium Board of Managers / Variance Committee		

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HH Superintendent Final Inspection Approval of Work:______ Date:_