



CORONADO SHORES CONDOMINIUM ASSOCIATION NO. 9

Remodeling Approval Request Form

1. **Owner's Full Name:** _____

Unit #: _____ Owner's Address: _____

City: _____ State: _____ Zip Code: _____

Local Phone #: _____ Off-site Phone #: _____

2. **Proposed Project:** Briefly describe planned project (attach additional sheets if needed)

3. **Attach Plans:** Attach a set of remodeling plans. The plans must meet the City of Coronado requirements for plan submittals for Coronado Shores Tenant Improvements.

4. **Attach Signed Copy of Remodeling Rules and Regulations:** Initial or sign all the pages of the remodeling rules and regulations.

5. **Contractor:** _____ Phone #: _____

Contractor's License Number: _____

Contractor's Insurance – please attach a copy of the contractor's Certificate(s) of Insurance.

Workman's Comp Insurance Carrier: _____

Workman's Comp Insurance Policy Number: _____

Liability Insurance Carrier: _____

Liability Insurance Policy Number: _____

Contractor's Prior Work in the Shores: _____

Owner's Signature: _____ Date: _____