

ALTERATIONS CHECKLIST

INTERIOR:

DETAILED SCOPE OF WORK

**FLOOR PLAN- LOCATION OF ALTERATION(S)
INDICATED-STRUCTURAL PLAN AS NEEDED**

CONTRACTOR-LICENSE # -INSURANCE**

ELECTRICAL LOAD CALCULATIONS*

(*i.e. APPLIANCE REPLACEMENT/ADDITION-WASHER/DRYER)see attached

EXTERIOR:

DETAILED SCOPE OF WORK

**FLOOR PLAN/SITE PLAN -LOCATION OF ALTERATION
INDICATED. AS APPLICABLE, ARCHITECTURAL DRAWINGS BASED ON
THE PROPOSAL. PICTURES OF THE ALTERATION SITE**

CONTRACTOR- LICENSE # -INSURANCE**

**NEIGHBORS SIGNED CONSENT
TO BE DETERMINED BY THE DIRECTOR**

**VERIFY MATERIAL STANDARDS WITH MUTUAL
MANAGER (i.e. TRIM, SIDING, STUCCO AND PAINT)**

**PICTURE AND/OR COLOR OF PROPOSED PRODUCT
(i.e. DOOR STYLE, WINDOW FRAME, SKYLIGHTS, SHADES, TILE)**

****NOTE:MUTUALS 1, 2, 3, 4, 5, 8, 22, 28, 29, 30, 39,40, 50,
55, 48, 56, 58, 59, 61, 65, 68 & 70 MUST BE LISTED AS
ADDITIONAL INSURED WITH AN ENDORSEMENT
LETTER FOR ANY WORK IN ROSSMOOR (INSURANCE
MUST BE CURRENT AND UP TO DATE AND SUPPLIED BY CONTRACTOR
WHEN APPLYING EACH TIME)**