

	Date:	

Maintenance Agreement Amendment Initiation Form

To begin the review process, please submit the following: (Required for ALL projects)

- One (1) Completed Maintenance Agreement Amendment Initiation Form
- One (1) Complete set of exhibits** for the project(s) to be amended

Once your exhibits have been approved, you will be asked to provide the following:

- One (1) copy of the Articles of Incorporation If property owner is an entity
- One (1) copy of the legally recorded Warranty Deed
- One (1) set of the drafted Maintenance Agreement with original signatures and notarial seals (The Contract Management staff will draft the agreement and send it to the applicant via e-Mail)
- One (1) copy of the site plan / vicinity map labeled as "Exhibit A"
- One (1) copy of approved Maintenance Agreement exhibits** labeled as "Exhibit B"
- One (1) copy of Certificates of General Liability Insurance labeled as "Exhibit C"
- Recording Fee Payment Contract Management staff will send over the invoice

**Project Exhibits

- Must be no bigger than 8 ½ x 11
- Can only be one-sided
- Must clearly detail the requested project showing its relation to the property line and the right-of-way
- Must provide Legal Description, North Arrow, Scale and Metes and Bounds of encroachment

I. PROJECT INFORMATION (Provide information for each box)

Owner / Company Name: *Must match name on agreement	
Project Address or Location:	
County:	
Legal Description:	

II. OWNER INFORMATION

Owner Name:									
Mailing Address:	City			ty:	y:				
City:		State:		I	Zip:				
Phone Number:			E-ma	ail:					
III. SIGNATORY	INFORMATION (F	Person wh	no will :	sign tl	he contr	acts)			
Applicant/Develop *Must match signa									
Contact Name:					Ti	itle:			
Street Address:			City:		S	State:		Zip:	
Phone Number:			E-mail				•	<u>.</u>	1
					regardin	3			
Contact Name:			1			itle:			
			E-ma						
Contact Name: Phone Number: escription of Project laintenance Agreen	nent contract num		E-ma	ail: nt am	Ti	itle:			
Contact Name: Phone Number: escription of Projectaintenance Agreen APPLICANT SIG	GNATURE	ber: (Be a	E-ma greeme s specif	ail: nt am	Ti	itle:			
Contact Name: Phone Number: escription of Project laintenance Agreen APPLICANT SIG	GNATURE	ber: (Be a	greeme s specif	ail: nt am	Ti	itle:			
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