



Customer Information

Date: _____
Tenant's First Name: _____ Tenant's Last Name: _____
Street Address: _____ Unit #: _____
City: _____ State: _____ Zip: _____
Community or Apartment Name: _____
Telephone #: _____ Alt Telephone #: _____

Management/Homeowners Association/Landlord's Information

As the Manager/Landlord/Homeowners Association Representative/Owner of the above mentioned property, I (we) represent that I (we) have the authority to sign this Letter of Permission and hereby do authorize the following modifications _____ at the above mentioned address and have reviewed the plan by _____ (contractor/vendor name) [Lic #: _____]. I (we) have reviewed the plan and approve the modifications to the property listed on the plan. I (we) understand the modifications are permanent, and that the State is not responsible for maintenance or repair of any modification nor for removal of any modification if the tenant ceases to reside at the residence.

Property name (if applicable): _____
Landlord/Homeowners Association Representative Name: _____
Street Address: _____ Unit #: _____
City: _____ State: _____ Zip: _____
Telephone #: _____ Alt Telephone #: _____
Signature (Wet or Digital Signature required): _____ Date: _____



Please share any additional details related to the approved modifications:

Private member information only to be completed by Provider after the landlord/HOA representative has signed consenting to home modifications.

Please indicate the member's information below

Member's First Name: _____ Member's Last Name: _____

CIN#: _____ Date of Birth: _____