

**EXHIBIT B**  
**Heights at Wailuna**

**Application for Modifications, Additions or Improvements**  
**(PART I)**

**Legal Homeowner(s)** \_\_\_\_\_ **FS** **LH** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_ **Lot Number** \_\_\_\_\_ **EPC: YES** \_\_\_\_\_ **NO** \_\_\_\_\_

**Day Phone** \_\_\_\_\_ **Alternate Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Description of modification, addition or improvement:**

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Irrigation/Sprinklers | <input type="checkbox"/> Extension/Enclosure     | <input type="checkbox"/> Walkway/Slabs |
| <input type="checkbox"/> Painting         | <input type="checkbox"/> Landscaping           | <input type="checkbox"/> Hot tubs/Swimming Pools | <input type="checkbox"/> Lighting      |
| <input type="checkbox"/> Roof Replacement | <input type="checkbox"/> Walls/Fences/Gates    | <input type="checkbox"/> Roof/Attic Accessories  | <input type="checkbox"/> Gutters       |
| <input type="checkbox"/> Garage Door      | <input type="checkbox"/> Utility/Side Doors    | <input type="checkbox"/> Siding/Chimney Repair   | <input type="checkbox"/> Other         |

**Please describe in detail what you wish to do (attach additional sheets if necessary). Address the specific requirements of Section 4.0. For Painting and Roof replacement requests, also fill out the reverse side.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Modification, addition, or improvement will be done by:**

Contractor Name: \_\_\_\_\_ License Number: \_\_\_\_\_  
Self: \_\_\_\_\_ Other: \_\_\_\_\_

**Estimated Start Date:** \_\_\_\_\_ **Estimated Completion Date:** \_\_\_\_\_

**Fee Enclosed (if required):** \_\_\_\_\_

Submit completed application with two (2) sets of drawings, blueprints, sketches, or product brochures clearly showing the intent and extent of the proposed work to the Architectural Committee via the Managing Agent at Hawaiian Properties, P.O. Box 38078, Honolulu, HI 96837-1078.

**Homeowner's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Notifications:**

Approval of this application by the Architectural Committee and/or Board of Directors is required before any improvement is permitted under the Heights of Wailuna Declaration of Horizontal Property Regime, By-Laws, and Rules and Regulations. Failure to obtain the required approval in violation of the By-Laws can result in the removal of all nonconforming structures or said improvements at the Owner's expense. For some improvements, homeowners of Leasehold units may require approval by the Lessor and must obtain any necessary approval directly from the Lessor.

In accordance with the By-Laws and Rules and Regulations, the Architectural Committee and Board of Directors are allowed up to sixty (60) days following receipt of an accurate and complete application to review and render a decision.

Approval or disapproval of this application is for esthetic purposes only, and does not in any way indicate an opinion of safety, structural quality or soundness of the building plan or other proposed improvement by the Architectural Committee and Board of Directors. The Homeowner is responsible for obtaining and posting a permit that is required by the City and County of Honolulu. Any modification required by the City and County Building Department to plans previously approved by the Architectural Committee and Board of Directors, must be re-submitted for review and approval.

**EXHIBIT B  
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**Paint Request Addendum:**

1. We are requesting to repaint our unit:

\_\_\_\_\_ With the same color (or current approved substitute) as the existing house color.

Authorized Paint Colors	Existing Color	Repaint Color
Wailuna Blue		
Wailuna Green		
Wailuna Grey		
Wailuna Yellow		
Wailuna Toast		
Wailuna Homewood		

\_\_\_\_\_ With a different authorized color as indicated.

2. We understand that we must use Sherwin Williams, semi-gloss, exterior paint for both house color and trim (white). These approved colors are on file (Control #50487) at the Kalihi and Waipahu stores.

\_\_\_\_\_ We will be using Sherwin Williams paints.

\_\_\_\_\_ We do not intend to use Sherwin Williams paint. We understand that we are to obtain a paint sample of the approved house color from the site manager and must present a brushout of the proposed matching color to the Architectural Committee for inspection and approval during daylight hours. Colors that do not match the authorized colors will not be approved. Any failure of this alternative procedure that results in the wrong color on a house will be corrected at owner's expense.

4. We understand that, if there are existing rust stains, we may need to countersink, caulk and prime nail heads to prevent recurrence of rust stains. Other repairs incident to painting may also require specific Board approval.

Homeowner's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Roof Shingle Replacement Addendum:**

\_\_\_\_\_ We will be replacing our roof shingles with Malarkey Roofing Products using the following authorized color and shingle type on file at the Managing Agent.

Authorized Malarkey Roofing Color	Re-roof Color
Antique Brown	
Midnight Black	
Sienna Blend	
Silverwood	
Storm Grey	
Weathered Wood	
Agave (Ecoasis Premium solar reflective)	
Mesquite (Ecoasis Premium solar reflective)	
Tumbleweed (Ecoasis Premium solar reflective)	

Homeowner's Signature \_\_\_\_\_ Date \_\_\_\_\_

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For Managing Agent: Date received: \_\_\_\_\_ Sequence No. \_\_\_\_\_ Fee Amount \$ \_\_\_\_\_ Check # \_\_\_\_\_