

\*\*\*\*\* A work authorization form must be completed for all exterior work on your home and property except window cleaning, gutter cleaning and black sealing of your driveway.

## WORK AUTHORIZATION FORM

Date: \_\_\_\_\_, 2010

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE (day) \_\_\_\_\_ (evening) \_\_\_\_\_ (cell) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

SCOPE OF WORK: *(you may attach a copy of the proposal received from the contractor)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

USING BENJAMIN MOORE PAINT  YES  NO

PAINT COLOR(s): \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_

Insured  YES  NO

Copy of Certificate of Insurance is attached to this request  
 YES  NO *(Additional Insured is Ipswich Club Homes Homeowner's Association and you; be sure your name and address appears as well)*

**If you do not have a copy of the Certificate of Insurance attached to this work authorization form, we cannot approve the requested work.**

Copy of a permit from the Town of Ipswich to perform this work is attached

Yes  No

**If you do not have a copy of the permit from the Town of Ipswich attached to this work authorization form, we cannot approve the requested work.**

Date you expect work to begin: \_\_\_\_\_

HOMEOWNER(s) signature(s)

\_\_\_\_\_

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