

EXHIBIT B

ARB APPLICATION FOR WORK TO EXISTING RESIDENCE

National Property Owners Association, Inc.
2350 Midland Road
Pinehurst, NC 28374
(910)235-4217

Contractor - 24 Hour Emergency

Contact Name:

Telephone:

Lot Number: _____

Property Address: _____

Property Owner: _____

Home Address: _____

Email Address: _____

Business Telephone: _____

Mobile Telephone: _____

Fax: _____

Type of work being done (i.e., landscaping, reroofing, painting, exterior addition or modification, interior work, etc.) and description.

Type of Work: _____

Description: _____

Contractor: _____

N.C. License #: _____

Business Address: _____

Email Address: _____

Business Telephone: _____

Mobile Telephone: _____

Fax: _____

Fee: \$ _____ (See Exhibit E for associated fees)

| ARB USE ONLY | | |
|-------------------------|--|-----------------|
| Submission Date to ARB: | Final ARB Approval Date: _____ | Notes: _____ |
| | Signatures: _____ _____ _____ | _____ |

Property owner has five (5) months to initiate project from the approval date.