



Mililani Town Association

95-303 Kaloapau Street
Mililani, HI 96789-1249
Phone (808) 623-7300

ADDENDUM REQUEST TO EXISTING MTA DESIGN APPROVED PROJECT

Legal Owner _____ Hm Ph _____ Wk Ph _____

Property Address _____

Mailing Address
(If different from above) _____

Note: Members of sub-associations, condominiums, townhouses, planned unit developments, etc MUST obtain written approval for this addendum to design change request from their respective Board of Directors or Property Management Company and submit it with this addendum request.

**If plans are being revised, please submit two (2) sets of plans.
If color samples are being revised, please submit color samples (minimum 2"x 2")
identified by color name and location of color change.**

Date of Approval _____

Type Of Project _____

Change To Project _____

Owner's Signature _____ Date _____

*****OFFICE USE ONLY*****

Unit # _____ Date Submitted _____ By _____

Unit Type: CPR PDH ZLL SA CL

____ APPROVED ____ DISAPPROVED – Reason for disapproval: _____

Authorized Signature _____ Date _____