



## Encroachment Permit Waiver

Mail to: 130 Gardeners Circle, Suite 123 Johns Island, SC 29455  
CassiquePropertyOwners@kiawah.com

I, as the property owner of (Address) \_\_\_\_\_  
in Cassique agree that I will be liable for (Contractor) \_\_\_\_\_  
as they complete the minor improvement of (Project) \_\_\_\_\_  
at the above stated address.

I understand the Cassique POA requires all contractors working in the neighborhood to have a valid Charleston County Business License along with automobile, workers compensation, and general liability insurance.

I understand the specified contractor is not allowed to park within the right of way and must park on my property.

I understand that this waiver of a Cassique Encroachment Permit does not allow the contractor to perform any exterior work without prior Cassique Architectural Review Board approval nor does it allow me to hire or delegate the minor improvement work to any other party or unlicensed contractor.

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Encroachment Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_