

APPLICATION FOR ARCHITECTURAL REVIEW

Please submit your application well in advance of your anticipated construction date, allowing the allotted time frame, per your CC&Rs, for a response. Approval must be granted prior to commencement of construction.

I/We _____ at unit _____ of the SYCAMORE GARDENS HOMEOWNERS ASSOCIATION submit the attached drawings and specifications for the proposed improvements and/or architectural alterations for the following:

Describe the proposed improvements:

Attach 2 copies of drawing(s) showing the type of construction, dimensions, type of materials, colors and locations on the lot (drawing should be to scale).

Contractor's License Number _____

If you are planning on doing the work on your own, please submit a copy of your Homeowners' Insurance policy with this application.

I/We have read and understand the Association's ARCHITECTURAL APPROVAL PROCEDURES AND STANDARDS (available on the Sycamore Gardens website). I/We agree that all provisions are a part of this application - including all homeowner obligations and liabilities specified.
____ (initial here).

I/We have discussed the proposed improvements and/or alterations and the attached drawings and specifications with homeowners most affected, whose signatures appear below.

I have secured their consent without objections except as noted. (Please note: affected homeowner is defined as side of, back of, or front of, if applicable).

Neighbor's Signature / Address Date	OBJECT TO CHANGES	APPROVE OF CHANGES
Neighbor's Signature / Address Date	OBJECT TO CHANGES	APPROVE OF CHANGES
Neighbor's Signature / Address Date	OBJECT TO CHANGES	APPROVE OF CHANGES
Neighbor's Signature / Address Date	OBJECT TO CHANGES	APPROVE OF CHANGES

(PLEASE CIRCLE EITHER "OBJECTION TO" OR "APPROVAL OF" CHANGES ABOVE)

I / We agree to pay or reimburse the Association for community-wide costs incurred in moving sprinkler lines and heads, plants and trees, electrical lines or fixtures, replanting of plants or grass destroyed during the construction, or any other expense that the Association incurs to correct construction damages. ____ (initial here)

I /We understand and agree that the Architectural Review Committee and/or Board of Directors approval is limited to authority granted to them under the Governing Documents of the Association and is an endorsement of architectural compatibility *without waiver* of applicable ordinances or city permit requirements. ____ (initial here)

I/We understand approval by the Architectural Committee and/or Board of directors is contingent on submission of a copy of required CITY PERMITS to the Property Manager **PRIOR TO commencement** of work. I/We understand that any city permits that are required are to be obtained at the expense of the homeowner. ____ (initial here)

I/We understand that failure to comply with the terms, conditions, restrictions, and promises set forth in the ARCHITECTURAL APPROVAL PROCEDURES AND STANDARDS and with qualifications for approval of this application by the Association Architectural Review Committee subjects me/us to liability for any deviation. I/We agree to indemnify the Association for any monies spent pursuant to the correction of such deviation. I/We understand that the Architectural Review Committee shall make final decision of what constitutes compliance and/or deviation from the plans and specification as approved. __ (initial here)

I/We agree to indemnify the Association for all costs and/or attorney’s fees expended to enforce the provisions of this agreement. ____ (initial here)

Proposed Start of Construction Completion Date

Signature of Owner(s) Telephone Number Email address Date

FOR OFFICE USE ONLY

- SYCAMORE GARDENS HOA ARCHITECTURAL REVIEW COMMITTEE – INITIAL APPROVAL

RECOMMENDATION:

____ Approved as presented __ Provisional Approval Subject to submission of City Permits

____ Approved with the following qualification(s): _____

____ Rejected for the following reason(s): _____

This approval is valid for the following number of days. If work is not completed within this time frame, an extension can be requested. _____ Days CITY BUILDING PERMIT # _____

For the Architectural Control Committee Date

For the Board of Directors Date

INFORMATION FOR HOMEOWNER RECORDS

CC & R's – ARTICLE III **USE RESTRICTIONS**

14. Structural Alterations:

“No structural alterations to the interior of any unit shall be made and no plumbing or electrical work within any bearing or common walls shall be made by any owner without the prior written consent of the Association.”

15. Exterior Alterations:

“No owner shall, at his expense or otherwise, make any alterations or modifications to the exterior of the buildings, fences, railings or walls situated within the development without the prior written consent of the Association.”

16. Compliance with the Laws, etc.

“Nothing shall be done or kept in any unit or in the common area which might increase the rate of, or cause the cancellation of, insurance on the development, or any portion thereof, without the prior written consent of the Association.”

Additional Information

The review form needs to be filled out for architectural improvements – including:

- Any changes made to the **back yard** that can be seen by neighbors.
- **Interior** structural or electrical modifications or changes that may affect the structural soundness or soundness to the neighbors unit.
- Installation of **cameras**.
- Changes to **windows**.
- Changes to **front yard landscaping** (Proposed landscaping improvements must be cleared through the Landscaping Company).

BUILDING PERMIT INFORMATION

SUBMIT THIS PAGE AS SOON AS YOU HAVE OBTAINED A BUILDING PERMIT

(check here) I am attaching a copy of the building permit

City Building Permit Number _____

Name of person/firm doing the construction _____

Construction Person Phone Number: _____

ATTACH A COPY OF THE BUILDING PERMIT