

ANY HOA

PROPERTY IMPROVEMENT APPLICATION

[NOTE: Plans must be submitted at least 45 days before activity begins]

NAME: _____ DATE: _____
(Please Print)

ADDRESS: _____ LOT No: _____

PHONE: (H) _____ (W) _____ Proposed Completion Date: _____

All Applications Must Be Submitted With A Plan To Scale (2 Copies)

TYPE OF ARCHITECTURAL AND/OR LANDSCAPING IMPROVEMENT

- Remodeling/Additions
- Outside Walks/Stairs
- Garage Doors/Exterior Doors
- Driveway/Parking Pads
- Greenhouse/Sunrooms
- Gazebos/Sheds/Play Equipment
- Swimming Pool/Solar Panels
- Decks/Patios
- Arbors/Overhangs
- Dog Houses/Runs
- Fences/Fence Additions & Retaining Walls
- Landscaping Front and/or back yd
- Satellite Dishes and/or Antennae
- Roofing Replacement
- Other

Materials to be Used:

- Wood Stucco Brick
- Stone Concrete
- Other _____

(Describe)

Is material same color and type as on home?

Yes No

Additional Comments: _____

PAINTING: Paint house new color Paint trim new color
Painting fence

Attach new paint color samples for stucco, trim, fascia and/or fence.
(No approval is required to repaint house or trim in exactly the same color)

To expedite the processing of your application, please show and explain your plans to all those neighbors who may be effected and have them sign in the appropriate place **on the reverse side of this form**. The Architectural Landscaping Committee may also contact them directly...if the scope of the project warrants such action.

[IF ADDITIONAL SPACE IS NEEDED, PLEASE USE THE REAR OF THIS FORM]

For Association Use Only:

Approved Not Approved Conditionally Approved

Comments: _____

By: _____ **Date:** _____

NEIGHBOR AWARENESS SIGN-OFF FORM

NEIGHBOR AWARENESS: The neighbor's approval is not necessarily a condition to your improvement/modification being approved by the Architectural Committee. The intent is to advise your neighbors who own property within close proximity of your lot and may be effected by your proposed improvement(s) by requiring their signature below. Neighbor's signing below indicate their awareness of this application. No application will be considered complete until there is evidence that the immediate neighbors and any neighbor who may be affected have been made aware of this application.

NEIGHBOR AWARENESS: I have reviewed the plans of Please print _____ and I am aware of all their proposed alterations/improvements shown on the attached plan.

NAME (PRINT) SIGNATURE ADDRESS PHONE DATE

RETURN FROM TO:

ARCHITECTURAL/LANDSCAPING REVIEW COMMITTEE
c/o OK MANAGEMENT
2400 Old Crow Canyon Road
Silverton, CA 94123
(513) 713-3180