CALDER RANCH COMMUNITY ASSOCIATION

ARCHITECTURAL REQUEST FORM

Return to: Avalon management Group, Inc. 31608 Railroad Canyon Rd. Canyon Lake, CA. 92587

Email: arc@avalonweb.com

Fax: (951) 244-0520

Name:	Date:			
Proper	ty Address:			
Mailing	Address (if different from above):			
Home	Phone:Business/Mobile Phone:			
I.	Proposed Project Information			
	Describe the proposed improvement in detail:			

II. Neighbor Advisement

With your submittal, please include three (3) copies One (1) copy of the Neighbor Notification Form, signed by any neighbors who will be visually impacted by your proposed Improvement(s). This includes any adjacent or neighboring Residential Lots, which may be visually impacted by your Improvement(s) from their rear yard.

(continued on next page)

III.	Do	ocuments Required for Submittal: Rear Yard Pre-Approval Policy	
		One (1) set of <u>detailed</u> plans as specified in the Rear Yard Pre-Approval Policy One (1) set of this application form \$50.00 processing and review fee	
IV.		ocuments Required for Submittal: All other submittals per Commurchitectural Guidelines and Procedures	ınity
		One (1) set of <u>detailed</u> plans as specified in the Community Design Guidelines One (1) set of this application form \$200.00 processing and review fee (front <u>or</u> rear yard) \$250.00 processing and review fee (front <u>and</u> rear yard) \$250 refundable deposit (required for all submittals) Completed Neighbor Notification Form	
•	0 0	g this document, I certify that the items included represent a true representationents that I plan to make to my property.	n of the
Own	er's Sig	Signature: Date:	

I	Neighbor Notification Form	ı
Name:	Name:	Name:
Address:	Address:	Address:
Signature:	Signature:	Signature:
Left rear neighbor	Rear neighbor	Right rear neighbor
	YOUR HOUSE	`
Name:	Name:	Name:
Address:	Address:	Address:
Signature:		Signature:
Left adjacent neighbor		Right adjacent neighbor
	1,1,1,1,1	1
Name:	Name:	Name:
Address:	Address: Signature:	Address:
Signature:	Signature	Signature:
Left front neighbor	Front neighbor	Right front neighbor

If neighbor is not impacted by improvements, then write "Not Impacted" in signature line. Signature on above form does not constitute approval of plans presented, only notification. Any concerns about plans being presented may be addressed, in writing, to the Association.

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NOTICE OF COMPLETION FORM

This form must be completed and returned to the Community Association within 30 days after the approved Improvements have been completed. After the completion is received and reviewed, your \$250 deposit will be returned to you.

Owner Name:	
Address:	
Residential Lot #:	
Phone:	
Summary of Completed Improvements	
Attachments (check box to indicate they have been enclosed):	
☐ Copies of photographs of all Improvements included. Please note that No Form is not complete if photographs of Improvements are not enclosed.	tice of Completion
By signing this form, the Owner is stating that Improvements have been comp to the scope and specification of the approved architectural application and in acc Community Design Guidelines.	
Signature:Date:	
Print Name:	

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