



Architectural Change Request Form

Name: _____ Date: _____

Property Address: _____

Mailing Address: _____

Phone: _____ E-mail: _____

Description of Improvements: _____

PLEASE INCLUDE THE FOLLOWING INFORMATION WITH YOUR REQUEST (ATTACH ADDITIONAL DRAWINGS TO THIS FORM).

- Location of residence on lot and the dimensions from lot lines.
- Complete dimensions of improvement proposed.
- Measurements of improvements in relation to residence and lot lines.
- Description of materials and color schemes.
- Drawings to show affected elevations.
- Contractor information including license #, contact information and insurance

The intent is to advise your neighbors who own property adjacent, facing or impacted by the improvement to your property line or unit. No approval is required. This is simply verification that impacted neighbors are made aware of your application. Neighbors shall sign this form and may add their comments on a separate sheet of paper to be attached with this application. The undersigned adjacent homeowners have been notified of the proposed improvements:

Address: _____ Signature: _____

Address: _____ Signature: _____

NOTICE TO OWNERS: Your proposed improvements may require a permit from the building department. You or your contractor should check with the building department about permit requirements before starting any work. No work should be done which may change the existing drainage patterns.

I UNDERSTAND AND AGREE THAT:

*****Please return this form to the Mills Management Services, Inc., 1645 South Rancho Santa Fe Road, Ste. #208, San Marcos, CA 92078 or via e-mail to admin@millsmanagementservices.com*****



The above and attached information is complete and accurate to the best of my knowledge. Improvement work is to be at no cost whatsoever to the Association. Any further maintenance, repairs or damage related to, or caused by this improvement shall be the responsibility of the owner, heirs, successors or assigns (including subsequent owners). Any deviation from the approved plans and specifications outlined in the application shall require subsequent approval from the Architectural Committee. Failure to obtain this approval will nullify the original approval and said improvements shall be deemed to have been undertaken without the Committee's approval.

I will assume the responsibility for any work under the above proposed improvement that I or my contractor accomplish, which may, in the future adversely affect the common area. I will assume responsibility for all future maintenance of this addition or improvement.

For conditional approvals, all conditions must be satisfied within 45 days of installation.

Homeowner Signature

DO NOT COMPLETE – ARCHITECTURAL COMMITTEE ONLY

COMMITTEE COMMENTS: DATE RECEIVED: _____

_____ APPROVAL WITHOUT CONDITION OR RESTRICTION

_____ CONDITIONAL APPROVAL: _____

_____ DISAPPROVAL: _____

COMMITTEE SIGNATURES:

BY: _____ DATE: _____

BY: _____ DATE: _____

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