

ARCHITECTURAL IMPROVEMENT APPROVAL REQUEST FORM

COMPLETE AND MAIL TO:

**Henry Ranch Owners Association
Post Office Box 190
Pleasanton, California 94566**

Name: _____ Date _____

Address: _____

Daytime Phone # _____ Evening Phone # _____

Briefly describe intended improvement: _____

A sketch of all improvements must be attached to this form to show location and dimensions. Please do not begin improvements until written approval is returned.

I/We understand the rules concerning the proposed improvement. I/We agree to abide by the rules set forth by the Design Review Committee and will be solely liable for the upkeep & maintenance and encroachment that this improvement may make on a neighbor's private property or on common areas. I/We agree to take responsibility for following any applicable local, state or federal laws or ordinances and for obtaining any required permits.

Signed: _____ Date: _____

Signed: _____ Date: _____

FOR OFFICE/COMMITTEE USE ONLY

Date received: _____ by: _____

Approved: _____ Conditional Approval: _____ Denied: _____

Date: _____ By: _____

Completed improvement inspection on: _____ by: _____

APPLICATION FOR ARCHITECTURAL CHANGE OR LANDSCAPE IMPROVEMENTS

ARCHITECTURAL IMPROVEMENT APPROVAL REQUEST FORM

_____, *owner(s) of premises at* _____
_____ *propose the following external improvements and/or*
architectural alterations at said premises: _____

Owner shall attach copies of all available plans and/or specification showing the nature, kind, shape, height, materials, and location to this request. All work shall be done in conformance with building codes and regulations and pursuant to all required permits. Owner shall be responsible for any damage to the exterior of the building or other property that may arise as a result of the above stated addition, change, or alteration, and shall be responsible for maintenance of same in conformance with the architectural requirements of the Association. Owner agrees to notify, as part of any offer or acceptance of sale, any future purchaser of the above stated home, that the responsibility stated herein is carried forward to the new Owner(s), and will obtain written agreement of same from new Owner also, as part of any such offer or acceptance of sale. Owner agrees to obtain and produce copies of all City permits and other documents required hereby, to the Association. Owner recognizes that this addition, change or alteration may be effected only upon written approval of the Association Board of Directors/Architectural Committee and that said Board may require its removal, at the Owner's expense, should it become necessary for safety, maintenance of surrounding structures, or lack of compliance herewith by the above-named Owner, or subsequent Owner(s).

The above-named Owner agrees to indemnify and hold the Association, its Board of Directors, Architectural Committee, Members, employees and agents harmless of any liability, injury, damage or costs that may be incurred as a result of the above stated addition, change or alteration. It is also understood that upon notification of completion of the above stated addition, change or alteration, the Architectural Committee or Board will inspect the final results.

Applicant agrees and understands any expense incurred by the Association as a direct or indirect result of the approved project shall be the sole responsibility of the Applicant, including all maintenance, repair or replacement of the approved project items.

I/we understand that this application will be presented at the next regularly scheduled meeting by the Design Review Committee, along with their recommendations, and that I will be informed of the Committee's decision within sixty (60) days of said meeting.

Signed: _____ Dated: _____

Signed: _____ Dated _____

APPLICATION FOR DESIGN REVIEW COMMITTEE APPROVAL AND AGREEMENT

Proximate Owners

(Please print)

Proximate
Homeowner

Neighbor: _____ Comments: _____

Address: _____

Phone: _____

Signature: _____ Date _____

Proximate
Homeowner

Neighbor: _____ Comments: _____

Address: _____

Phone: _____

Signature: _____ Date _____

Proximate
Homeowner

Neighbor: _____ Comments: _____

Address: _____

Phone: _____

Signature: _____ Date _____

NOTICE TO ALL CONTIGUOUS NEIGHBORS: YOU HAVE TEN (10) DAYS FROM THE DATE OF THIS REVIEW TO SUBMIT ANY PROTESTS REGARDING THIS PLAN (WHICH HAVE NOT BEEN NOTED ABOVE) TO THE DESIGN REVIEW COMMITTEE. YOUR PROTEST MUST BE MAILED TO THE DESIGN REVIEW COMMITTEE, C/O CJM ASSOCIATION SERVICES, INC., P.O. BOX 190, PLEASANTON, CA 94566.