

AVOCET

ASSOCIATION, INC.

C/o Association Management Group
Tel: (760) 931-4180 Fax: (760) 931-4188

2131 Las Palmas Drive, Suite A, Carlsbad, CA 92011-1524
Email: amg@sdamg.net

Please complete this application and attach (2) copies of your proposed property improvements. Mail or deliver to:

**Avocet Association, Inc.
c/o Association Management Group
2131 Las Palmas Drive, Suite A
Carlsbad, CA 92011-1524
E-Mail: amg@sdamg.net**

I. HOMEOWNER INFORMATION

NAME: _____ DATE: _____

PROPERTY ADDRESS: _____

MAILING ADDRESS: _____

STREET CITY/STATE ZIP

EMAIL ADDRESS: _____

HOME NUMBER: _____ WORK NUMBER: _____

PROPOSED STARTING DATE: _____ PROPOSED COMPLETION DATE: _____

PLEASE NOTIFY MANAGEMENT COMPANY OF COMPLETION TO SCHEDULE INSPECTION

II. ARCHITECT, ENGINEER OR OWNER'S REPRESENTATIVE (if applicable):

NAME: _____ PHONE NUMBER: _____

MAILING ADDRESS: _____

STREET CITY/STATE ZIP

III. DESCRIPTION OF CHANGES DESIRED:

(give full details of purpose and/or reason, type and colors of materials to be used and location on the property)

IV. NEIGHBOR AWARENESS: (Not Approval)

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 sheet of paper that may be attached to this application.

NEIGHBOR'S NAME & ADDRESS

No Objection

SIGNATURE

NEIGHBOR'S NAME & ADDRESS

No Objection

SIGNATURE

NEIGHBOR'S NAME & ADDRESS

No Objection

SIGNATURE

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

- 1) Description of improvement.
- 2) Location of residence on lot and the dimensions from lot lines.
- 3) Complete dimensions of improvement proposed.
- 4) Measurements of improvements in relation to residence and lot lines.
- 5) Description of materials and color schemes.
- 6) Drawings to show affected elevations.
- 7) Plant inventory (list type, size and location on drawings).
- 8) Height of trees at maturity.

I UNDERSTAND AND AGREE THAT:

The above and attached information is complete and accurate to the best of my knowledge. Improvement work/installation 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 or assigns. Any deviation from the approved plans and specifications outlined in the application shall require subsequent approval from the Architectural Control Committee. Failure to obtain such subsequent approval will nullify the approval of the Architectural Control Committee and said improvements shall be deemed to have been undertaken without the Committee's approval.

I understand that my proposed improvements may require a permit from the City/County Building Department or other government agencies and I will obtain all required permits before commencing any work. I agree I will do no work that will change the existing drainage patterns. I am aware that any changes may result in substantial damage to adjacent properties.

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

SIGNATURE: _____ DATE: _____
OWNER (authorization of representative must be attached)

DO NOT COMPLETE -- ARCHITECTURAL REVIEW COMMITTEE ONLY

COMMITTEE COMMENTS:

APPROVAL WITHOUT CONDITION OR RESTRICTION

CONDITIONAL APPROVAL

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DISAPPROVAL REASONS:

DATE: _____

COMMITTEE SIGNATURES: _____

DATE: _____

DATE: _____

FINAL INSPECTION:

INSPECTED BY: _____
(Print Name)

DATE: _____

SIGNATURE: _____

- IS IN COMPLIANCE
- IS NOT IN COMPLIANCE WITH APPROVED PLAN

REINSPECTED (if required):

INSPECTED BY: _____
(Print Name)

DATE: _____

SIGNATURE: _____

- IS IN COMPLIANCE
- IS NOT IN COMPLIANCE WITH APPROVED PLAN