

**FIRST VILLAGE COURT HOMEOWNERS ASSOCIATION
ARCHITECTURAL APPROVAL APPLICATION**

Owner Name *(please print)* _____ Date _____

Property Address _____ Simi Valley, CA 93063

Mailing Address *(if different)* _____

Home Phone _____ Evening Phone _____

Email _____

Proposed Improvements _____

Signature _____ Starting Date _____

The Board/committee has up to 30 days to consider this request. Please allow for this time.

NEIGHBOR ADVISEMENT:

The Architectural Committee has determined that it is in your best interest to advise your neighbors of any proposed improvements to your property and request that you have your adjacent neighbors sign where indicated below.

<i>Neighbors Signature</i>	<i>Address</i>	<i>Objections</i>
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_____	_____	_____
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Objections by neighbors do not mean disapproval by committee. Objections will be reviewed by the committee.

SUBMITTAL:

Please review CC&R's (Article VI, p 25-33) for additional requirements. Please include brochures, color chips, etc., if appropriate.

1. Description of improvement
2. Location of improvement and residence on plot plan with dimensions to property lines
3. Materials to be used and colors of materials
4. All dimensions of improvements
5. Elevations of proposed improvements relating to existing dwelling

If any of the above information is not included, your plans will be returned to you without processing.

MAIL TO:

Or Fax To: (805) 388-0856

**First Village Court Homeowners Association
c/o Anchor Community Management, Inc.
P. O. Box 3237, Camarillo, CA 93011-3237**

ARCHITECTURAL APPROVAL REQUEST

I understand and agree that:

1. This application for architectural review will be submitted to Anchor Community Management no later than thirty (30) days prior to the anticipated commencement of work.
2. No work on this request shall commence until written approval of the Architectural Control Committee has been received.
3. Failure to complete the work within the period of time prescribed by the CC&Rs will cause the approval to be rescinded and resubmission will be required. Extenuating circumstances should be brought to the attention of the Architectural Control Committee.

Owner's Signature: _____ Date: _____

Owner's Signature: _____

ARCHITECTURAL CONTROL REVIEW

Approved Disapproved Conditional Approval

Reason for disapproval, or conditions of approval (*required*): *All decisions are final.*

By _____

Approval Date _____