

ARCHITECTURAL CHANGE REQUEST

PO Box 530778 – HENDERSON, NV 89053
(702) 868-0900 – (FAX) 866-248-6564

Date: _____ Received By HOA _____

Owner's Name _____ Phone: _____

HOA Address: _____

Mailing Address (if different from above) _____

Type of Home: Single Family Condominium

Golf Course / Open Space Lot: Yes No

IN ACCORDANCE WITH THE DECLARATION OF COVENANTS, CONDITIONS, AND RESTRICTIONS FOR THE HOA, AND THE DESIGN GUIDELINES, APPLICATION IS HEREBY SUBMITTED FOR REVIEW AND APPROVAL OF THE FOLLOWING DESCRIBED IMPROVEMENTS. ANYTHING NOT LISTED HERE AND NOT CLEARLY SHOW ON PLANS WILL NOT BE A PART OF THIS REVIEW.

NATURE OF REQUEST (Check one or more of the following)

- Review / Approval of an addition to existing dwelling (room addition / patio enclosure) *
- Review / Approval of landscape plans / changes (barricades must be provided). *
- Review / Approval of concrete work (walkways, patios, etc). *
- Review / Approval of walls (if damaged and need repair). *
- Review / Approval of fences, gates, and entry doors. (color of these items must conform to CC&R guidelines; i.e. has to match the home exterior paint color or be a normal "wood grain" door.
- Review / Approval of patio covers and patio screening. *
- Review / Approval of pools, spas (pool equipment must be screened from view). *

Other _____

***NOTE: This improvement requires that your neighbors have been advised of the proposed improvement and sign off on Exhibit B "Neighbor Awareness Statement" Form. Only the neighbors impacted by the change are required to sign off.**

IN SUPPORT OF THIS APPLICATION, THE FOLLOWING REQUIRED ITEMS MUST BE SUBMITTED:

TWO COPIES (2) OF BOTH THE PRELIMINARY AND FINAL PLANS. THE PLANS MUST SHOW THE FOLLOWING (WHERE APPLICABLE) : SITE PLAN, FLOOR PLAN, EXTERIOR ELEVATIONS, ROOF DESIGN, EXTERIOR MATERIALS AND FINISHES, LANDSCAPING PLAN, AND SUCH OTHER ITEMS AS MAY BE NEEDED TO REFLECT THE CHARACTER AND DIMENSIONS OF THE IMPROVEMENTS. IF APPLICATION IS INCOMPLETE, THE REVIEWER WILL NOTIFY THE APPLICANT AS TO THE NEEDED DOCUMENTS AND THE APPLICATION WILL NOT BE FURTHER CONSIDERED UNTIL RECEIPT OF THESE MATERIALS.

THIS APPLICATION REQUIRES THE SIGNATURE OF THE HOMEOWNER AND OR AGENT. THE UNDERSIGNED ACKNOWLEDGES THAT IF ANY WORK HAS COMMENCED PRIOR TO THE APPROVAL OF THE ARC THAT DOES NOT CONFORM TO THE CC&R'S OR DESIGN GUIDELINES, THEY WILL BE LIABLE FOR ALL COSTS NECESSARY TO BRING THE WORK UP TO THE CURRENT STANDARD. THE HOMEOWNER UNDERSTANDS THE ARC WILL ENTER THE PROPERTY FOR THE PURPOSE OF INSPECTING ALL WORK IDENTIFIED ON THE APPLICATIONS AS BEING SATISFACTORILY COMPLETED.

Submitted By: _____ Homeowner
Submitted By: _____ Contractor

THIS APPROVAL DOES NOT RELIEVE THE HOMEOWNER FROM ALL CC&R AND HOA DESIGN GUIDELINE REQUIREMENTS, NOR DOES IT CONSTITUTE APPROVAL AS TO COMPLIANCE WITH THE APPLICABLE NEVADA LAW, CLARK COUNTY, OR CITY OF HENDERSON BUILDING AND SAFETY REQUIREMENTS OR ZONING ORDINANCES.

ACTION TAKEN BY THE ARCHITECTURAL REVIEW COMMITTEE

- APPROVED (The request submitted is approved).
- APPROVED AT NOTED (The document submitted is approved subject to the notations).
- DISAPPROVED (The entire document is not approved and must be resubmitted).

SIGNATURE OF COMMITTEE MEMBER OR AUTHORIZED AGENT _____ DATE _____

SIGNATURE OF COMMITTEE MEMBER OR AUTHORIZED AGENT _____ DATE _____

COMMENTS

EXHIBIT B
NEIGHBOR AWARENESS STATEMENT

On (date) _____, the attached plans for _____ were made available to all neighbors as required and noted below for their review. They have been notified that I am submitting these plans for Architectural and Landscape Control Committee approval.

Signature of front facing neighbor: _____

Address: _____

APPROVE: _____ DISAPPROVE: _____

Signature of front facing neighbor: _____

Address: _____

APPROVE: _____ DISAPPROVE: _____

Signature of side neighbor: _____

Address: _____

APPROVE: _____ DISAPPROVE: _____

Signature of side neighbor: _____

Address: _____

APPROVE: _____ DISAPPROVE: _____

Signature of rear neighbor: _____

Address: _____

APPROVE: _____ DISAPPROVE: _____

Signature of rear neighbor: _____

Address: _____

APPROVE: _____ DISAPPROVE: _____

HOMEOWNER SIGNATURE

DATE