

RIVERSIDE SUN CITY HOMEOWNERS ASSOCIATION

ARCHITECTURAL APPLICATION

Owner Name: _____ Date: _____

Property Address: _____

Mailing Address (if different from above): _____

Email: _____

*Pursuant to CC&Rs; Article XIV, Section 14.4, please sign here if you consent to receiving all notices/letters pertaining only to this specific Architectural Application by means of email (all emails will be sent to the email address provided above): _____

Home Phone: _____ Mobile Phone: _____

I. Proposed Project Information

Describe the proposed improvement in detail: **Please print legibly or this application will not be accepted.**

Contractor's Name (if applicable) _____ License No. _____

II. Neighbor Awareness

With your submittal, please include a copy of the Neighbor Awareness Form, signed by any neighbors that will be visually impacted by your proposed improvement(s). This includes any adjacent or neighboring lots.

III. Documents Required for Submittal

- Drawings which should include details of size, design, color and materials.

We, the undersigned, acknowledge that all approved improvements will be at our expense, and we will comply with all State, County, and Community Regulations. We understand that we are required to submit plans / drawings of the proposed modification. The final appearance will be as good as, or better than before work began. We agree to hold harmless the Riverside Sun City Homeowners Association and Avalon Management Group, Inc., from any liability, damage, and / or loss resulting from the proposed modifications described herein, whether or not constructed pursuant to approved plans, drawings, and / or specifications. In the event the completed project does not comply with the approved application, the owner will be responsible to correct the work to conform to the approved application at his sole expense. This acknowledgement of responsibility is also applicable to any future Owner/Occupant of the residence having added the improvement listed above. Architectural approval is for the purpose of aesthetic appearance within the Community only. **Please note: The Architectural Committee requires a maximum of forty-five (45) days to review and process completed applications before modifications should begin.**

By signing this document, I certify that the items included represent a true representation of the improvements that I plan to make to my property.

Homeowners Signature: _____ Date: _____

Return Completed Application to one of the following Committee Member
Delia Schmidt (951)723-1800; Charlotte Ross (951)206-4154; Mary Beasley (909)499-6833;
Donnamaria Katalinich (714)317-9912; Myrna DuBord (951)301-7039

RIVERSIDE SUN CITY HOMEOWNER ASSOCIATION NEIGHBOR AWARENESS FORM

(Owner to Complete)

NEIGHBOR AWARENESS - The intent is to advise your neighbors who own property adjacent to your lot (property) line or unit. Neighbors must sign this form and may add their comments or concerns in the space provided below OR may independently submit their comments or concerns in writing.

Impacted Rear Neighbor		Impacted Rear Neighbor	
Name		Name	
Address		Address	
Signature	Date	Signature	Date

Common Area or Back Yard - Rear of Home

Adjacent Neighbor		Adjacent Neighbor
Name	Name	Name
Address	Address	Address
Signature	Date	Signature
		Date

Your Street - Front of Home

Facing Neighbor	Facing Neighbor	Facing Neighbor
Name	Name	Name
Address	Address	Address
Signature	Date	Signature
		Date

NEIGHBOR CONCERNS OR COMMENTS:
