RIVERSIDE SUN CITY HOMEOWNERS ASSOCIATION

ARCHITECTURAL APPLICATION

Owner Name:		Date:				
Prop	erty Address:					
Mailing Address (if different from above):						
	il:					
botto	m of this application, I hereby	ction 14.4, by providing my e-mail address above and my signature at the consent to receiving all notices/letters pertaining to this specific of e-mails. All emails will be sent to the email address provided above:				
Hom	e Phone:	Mobile Phone:				
I. Desci	Proposed Project Information ribe the proposed improvement in	on detail: <u>Please print legibly or this application will not be accepted.</u>				
	Contractorio Nomo (if annic	License No				
	Contractor's Name (II applies	able) License No				
II.	•	include a copy of the Neighbor Awareness Form, signed by any lly impacted by your proposed improvement(s). This includes any				
III.	Documents Required for Sul • Drawings which should	omittal include details of size, design, color and materials.				
State, proposition of the Cand p	county, and Community Regulationsed modification. The final appearates the Riverside Sun City Homeouge, and / or loss resulting from the proved plans, drawings, and /or spoved application, the owner will be expense. This acknowledgement of added the improvement listed altonomunity only. Please note: The process completed applications before the signing this document, I certain the process of the control of the process completed applications before the process completed applications before the control of the process completed applications before the control of the process completed applications before the control of the process completed applications before the process completed applications applied the process completed applications before the process completed applications applied the process completed applications applied the process completed applications applied the process completed	all approved improvements will be at our expense, and we will comply with all ions. We understand that we are required to submit plans / drawings of the rance will be as good as, or better than before work began. We agree to hold wners Association and Avalon Management Group, Inc., from any liability, proposed modifications described herein, whether or not constructed pursuant ecifications. In the event the completed project does not comply with the responsible to correct the work to conform to the approved application at his responsibility is also applicable to any future Owner/Occupant of the residence love. Architectural approval is for the purpose of aesthetic appearance within Architectural Committee requires a maximum of forty-five (45) days to review ore modifications should begin.				
	-					
Hom	eowners Signature:	Date:				

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 1	Rear Neighbor	Imp	Impacted Rear Neighbor Name		
	Name		Name			
	Address		Address	Address		
	Signature	Date	Signature	Date	e	
		Common Area or	Back Yard - Re	ear of Home		
Ad	djacent Neighbor			Adjacent 1	Neighbor	
e		YOU	UR HOUSE	Name		
ess				Address		
iture	Date	NameAddress		Signature	Date	
		Your Stre	et - Front of Ho	ome		
Faci	ng Neighbor	Facing	g Neighbor	Facing	Facing Neighbor	
		Name		Name		
s Address				Address		
ure	Date	Signature	Date	Signature	Date	
NEIGHI	BOR CONCERNS OR	COMMENTS:				

Name

Address

Signature

Name

Address

Signature

RIVERSIDE SUN CITY HOMEOWNERS ASSOCIATION

NOTICE OF COMPLETION

This form must be completed and returned to the Architectural Committee within 30 days after the approved improvements have been completed.

Owner Nar	ne:	Date:
Property A	ddress:	
Mailing Ad	dress (if different from above):	
Email Addr	ress:	
Home Pho	ne:	
Mobile Pho	one:	
Summary o	of Completed Improvements:	
Attachmer	its (check box to indicate they have been encl	osed):
□ Сор	ies of photographs of all improvements includ	ded. Please note that the Notice of Completion form is not complet
	if photographs	of improvements are not enclosed.
Signature:		Date:
		ovements completed are in accordance to the scope and specification

Delia Schmidt (951)723-1800; Charlotte Ross (951)206-4154; Mary Beasley (909)499-6833;

Return Completed Notice of Completion to one of the following Committee Members

of the approved Architectural Application and in accordance with the Community's Architectural Guidelines.

Donnamaria Katalinich (714)317-9912