

**RANCHO FANITA VISTAS HOMEOWNERS ASSOCIATION REQUEST FORM FOR
ARCHITECTURAL IMPROVEMENTS OR CHANGES**

DATE _____ UNIT # _____ UNIT ADDRESS _____

OWNER: _____ MAILING ADDRESS: _____

PHONE: _____ UNIT PHONE: _____

SUBMITTAL REQUIREMENT: THE FOLLOWING MUST BE SUBMITTED WITH ALL APPLICATIONS, NO IMPROVEMENT CAN PROCEED WITHOUT PRIOR WRITTEN APPROVAL OF THE ARCHITECTURAL COMMITTEE. LACK OF ANY ITEMS OR INSUFFICIENT DATA ON ANY ITEMS WILL CAUSE DELAY IN CHECKING AND APPROVING PLANS.

1. STRUCTURES

A) **PLOT PLAN - MUST INCLUDE PROPERTY LINES AND DIMENSIONS, SITE OF PROPOSED NEW CONSTRUCTION AND ITS RELATIONSHIP TO PROPERTY LINES AND EXISTING STRUCTURES, LOCATION AND DIMENSIONS OF EXISTING STRUCTURES.**

B) **EXTERIOR ELEVATION - AN EXTERIOR. ELEVATION OR RENDERING WHICH FULLY EXPLAINS THE STRUCTURE.**

C) **BUILDING PLAN - CONSTRUCTION DETAILS TO ASSIST IN EVALUATING THE PROJECT; INCLUDE DIMENSIONS, MATERIALS, COLORS AND NAME OF CONTRACTOR.**

2. EXTERIOR PAINTING - CITY PERMIT REQUIRED. COLOR CHIPS OF ROOF, TRIM FASCIA, AND STUCCO MUST BE SUBMITTED TOGETHER.

NOTE: COMMITTEE APPROVAL COVERS AESTHETIC AND CC&R INTEREST ONLY.

DESCRIBE PROPOSED CHANGES IN DETAIL: _____

ANTICIPATED COMPLETION DATE: _____

HOMEOWNER WILL BE NOTIFIED WITHIN 5 WORKING DAYS OF THE BOARD DECISION.

NOTICE TO OWNER: YOUR PROPOSED IMPROVEMENT MAY REQUIRE A PERMIT FROM THE CITY OF SANTEE BUILDING INSPECTION DEPARTMENT (562-6153). APPROVAL OF EXECUTIVE BOARD IS REQUIRED FOR ISSUANCE OF PERMIT. YOU OR YOUR CONTRACTOR SHOULD CHECK WITH THE DEPARTMENT ABOUT PERMIT REQUIREMENTS BEFORE STARTING ANY WORK.

DRAINAGE AND STRUCTURE IS THE EXCLUSIVE RESPONSIBILITY OF THE OWNER, INSTALLER AND CITY OF SANTEE.

YOUR SIGNATURE ON THE BACK OF THIS FORM CONSTITUTES YOUR PERMISSION FOR COMMITTEE MEMBERS TO ENTER YOUR PROPERTY TO INSPECT THE PROPOSED IMPROVEMENT AND TO MAKE APPROPRIATE REVISITS DURING AND AFTER CONSTRUCTION TO VERIFY COMPLIANCE.

(CONTINUED)

FOR IMPROVEMENTS ABOVE FENCE LINE, SIGNATURES FROM NEIGHBORS ON EACH SIDE AND TO REAR OF LOT ARE NEEDED. THE UNDERSIGNED NEIGHBORS HAVE NO OBJECTION TO THE PLANNED IMPROVEMENT.

NAME	ADDRESS
_____	_____
_____	_____
_____	_____
_____	_____

MAIL OR FAX TO:
 PROFESSIONAL HOA CONSULTANTS
 8181 MISSION GORGE ROAD, SUITE E
 SAN DIEGO, CA 92120
 619-229-0044

OWNERS SIGNATURE _____	DATE _____
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RECOMMENDATION OF COMMITTEE

DATE RECEIVED: _____ LOT # _____

CONCEPT AND DESIGN:

_____ APPROVED _____ DENIED

_____ APPROVED WITH MODIFICATIONS REQUIRED AS BELOW:

SIGNATURE OF COMMITTEE CHAIRPERSON _____	DATE _____
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DECISION OF THE BOARD OF DIRECTORS: _____

_____ DATE _____

DATE HOMEOWNER INFORMED: _____

HOMEOWNER RESPONSE: _____

REVIEW OF BUILDING PERMIT: _____ BY _____

COMMITTEE AS-BUILT APPROVAL: _____

DATE

DATE FILE CLOSED _____