	377 I Corenzo Application for Architectural Alter		C Er	n Lorenzo, C Dffice: (510) 2 Fax: (510) 3 nail: info@sl osite: www.sl	276-4554 397-2091 vha.com	
н	OMES ASSOCIATION Allow 30 days for processing	5				
Nam			DATE R	ECEIVED:		
Add	ress: Acct#	_				
Phor	ne: Email:	_				
Desc	cription of request for change/additions:	Staff In		EVIEWED:		
		-				
		-				
	ASE SUBMIT ALL OF THE FOLLOWING (as appropriate): PHOTO of existing lot/structure/yard and plot map - Photo plan. Plot map must include detailing lot lines, the outline of you footage and the proposed modifications or changes. \rightarrow You must have accurate dimensions of all modification(s) so as change(s) as they relate to property lines and setbacks - Detail all Provide detailed product specifications materials, colors, finish, sa brochures \rightarrow These generally will not be returned to you so you should obta	our proje to accur elevatio mples ar	include ect, total cately loc ns, sizes ad produ	square cate your pro and heights.	-	
	Provide names and descriptions of plants, trees and all vegetation:					
	Projected date of starting and finishing work: Start: Finish: Two (2) copies of any and all plans submitted to Alameda Cou	nty Diese				
	Two (2) copies of any and all plans submitted to Alameda County Planning and Building Departments for approval of additions/buildings/structures/exterior remodels/pools/driveways \rightarrow Prior to submitting plans to the County it is advisable to submit your plans to the Association for					
	preliminary review of compliance with CC&R's. Copy of valid county building permit					

NOTICE TO HOMEOWNERS:

Your proposed improvement may require a permit from the County Building Department. It is solely the responsibility of you or your contractor to check with the County Building Department about permit requirements before starting any work.

AGREEMENT BY APPLICANT:

I/we assume all responsibility for all work to be performed in accordance with this Application.

This includes (1) conformity of completed improvements to the plans and specifications as approved by the Association, (2) completion within any time limitations projected or imposed and (3) assumption of responsibility for any future consequences that may adversely affect neighbors or common area. I/we also understand that the Association may require an additional agreement to be recorded with title further specifying these responsibilities and giving notice to future owners.

Date

Owner's Signature

Neighbor Awareness – Second Stories:

If required, you must have your immediate neighbors review your plans and sign below indicating an awareness of your intention. This does not constitute an approval or disapproval of your plans and serves solely as an acknowledgement.

Printed Name	Address	Phone	Signature	Date

Please deliver completed form and requested attachments to the address above.								
For Internal Use Only								
STAFF	NOTES:							
Initials		Date	Initials		Date			
	Plans Approved As Is			Entered in Access				
	May Require a Variance			Scanned				
	Verified County Permit			Entered in Book				
	Board Approval if needed			Sent to Owner				
				Hearing Date				
Board I	Decision at Hearing:							