WINDSOR BRIXTON HOMEOWNERS ASSOCIATION DESIGN REVIEW REQUEST FORM

Return form to: Windsor Brixton HOA

c/o Avalon Management 31608 Railroad Canyon Road Canyon Lake, CA 92587

Phone: (951) 244-0048 Fax: (951) 244-0520

Email: Windsor@Avalonweb.com

Name	me:	Date:
Prope	perty Address:	
Mailir	ling Address (if different from above):	
Home Phone:		Business/Mobile Phone:
Emai	ail Address:	
SUBI	BMITTAL CHECK LIST:	
	Design Review Request Form	
		nature, kind, shape, height and materials, including the color Plans and Specifications"), clearly indicating all proposed
	Floor plans, if an Owner is requesting permission	n to remove or relocate a wall
	Description of materials and colors and material samples	
	A proposed construction schedule (including pro	oposed start and completion dates)
	Certificates of insurance (including contracto insurance)	rs exclusions and proof of valid workers compensation
	Completed Neighbor Notification Form (see atta	nched page)
	Permits and licenses, if applicable	
their p		ners to pay fees, costs, or expenses associated with reviewing and approving al consultant to help with the review process. If the Committee determines
Start	rt/_ Finish/	/ Floorplan:

4813-4226-7993, v.3

PROPOSED DESIGN IMPROVEMENT(S)	
I/we understand that the proposed improvements may nor other Governmental Agencies and I/we will obtain a I/we agree I/we will do no work that will change the exchanges in the existing drainage pattern may result in sul/we will be held responsible.	III required permits before commencing any work. xisting drainage patterns. I/we are aware that any
I/we assume the responsibility for any work, including cand specifications as approved by the Board or, if a satisfaction of any time limitations for their completic approval under the above proposed modifications/impr for any work and that I/we or my contractor accomp adjacent properties and/or Association Property. I/we w of this modification and/or improvement.	ppointed, the Design Review Committee and the on as may be specified in conjunction with such ovements. Further, I/we assume full responsibility lishes which may, in the future, adversely affect
I/we understand that prior to commencing any work I/w forth in the Design Guidelines.	e must provide a deposit to the Association as set
Signature:	Date:
Signature:	Date:
Do not write below this line (For Board/D	resign Review Committee use only)

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WINDSOR BRIXTON HOMEOWNERS ASSOCIATION NEIGHBOR NOTIFICATION FORM

Name:	Name:	Name:
Address:	Address:	Address:
Signature:	Signature:	Signature:
Left rear neighbor	Rear neighbor	Right rear neighbor
Name:	YOUR HOUSE	Name:
Address:	Name:	Address:
Signature:	Address:	Signature:
Left adjacent neighbor		Right adjacent neighbor
Name:	Name:	Name:
Address:	Address:	Address:
Signature:	Signature:	Signature:
Left front neighbor	Front neighbor	Right front neighbor

If neighbor is not impacted by improvements, meaning no part of the improvements will be visible to them, then write "Not Impacted" in that neighbor's signature line

Signature on above form does not constitute approval of plans presented, only notification. Any concerns about plans being presented may be addressed, in writing, to the Association.

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