Southshore Hills POA

For information or to contact your Board visit: ***www.southshorehills.com***

ARCHITECTURAL REQUEST FORM

IMPORTANT: Complete the checklist below for all Architectural Request Forms

PROPERTY OWNER INFORMATION

Property Owner's Name(s): _____

Property Address: _____

Phone: _____ **E-mail Address:** _____

PLAN SUBMITTAL CHECKLIST

- ☐ Architectural Request Form completed (page 1)
- ☐ Architectural Guidelines and CC&R Acknowledgement signed by all owners on title (page 2)
- ☐ Color photographs of the front of the home as seen from the street, both sides, and the areas you wish to modify
- ☐ Neighbor Awareness Form completed (page 3)* *Not required for initial review*
- ☐ Plot Plan* – must be legible and include all dimensions and hardscape setbacks, drain locations, and drainage patterns; elevation drawings are required for all vertically constructed modifications

**Not required for initial review. The Architectural Committee will provide written notice if this is required to complete the review of the request.*

DESCRIPTION OF IMPROVEMENTS

_____

_____

_____

_____

_____

PLEASE SUBMIT COMPLETED FORMS TO:

Kai Seymore, Community Manager
E-mail: kai@cpm1.com
Phone: 805-987-8945
Community Property Management
751 E. Daily Drive, Suite 300, Camarillo, CA 93010
Mailing: P.O. Box 2817, Camarillo, CA 93011

Homeowner Signature: _____ **Date:** _____

BOARD / COMMITTEE USE ONLY **Date Received:** _____

☐ **Approved** ☐ **Approved as Noted** ☐ **Not Approved at This Time**

Comments:

_____

_____

X _____ **Date:** _____

X _____ **Date:** _____

X _____ **Date:** _____

ARCHITECTURAL GUIDELINES AND CC&R ACKNOWLEDGEMENT

Property Address: _____

All Architectural Request Forms submitted for review by the Board of Directors or the Architectural Committee are reviewed for aesthetic purposes only, based on compliance with the Architectural Guidelines as well as the Covenants, Conditions, and Restrictions (CC&Rs). All owners are responsible for ensuring that their plans are in full and complete compliance with any and all applicable City, County, State and/or Federal laws, building codes, fire codes and ordinances, health and safety codes, or other laws applicable to the plans submitted for approval and, by his or her signature, warrants and represents that the submitted request is in full compliance with the same.

The Southshore Hills Property Owners' Association assumes no responsibility for technical or engineering specifications.

I hereby acknowledge and fully understand that under no circumstances should my contractor or I begin any work on my property until a written approval letter has been issued stating I have received approval for **all** the improvements to my residence, and that no sign advertising any company, service, or product will be erected upon my property as a result of these proposed improvements.

I hereby acknowledge and fully understand the Architectural Guidelines and the CC&Rs pertaining to the modifications of my property. Should I violate any Association regulations, I acknowledge that I will be held responsible for all costs associated with changes necessary to bring my lot into architectural compliance as per my Association Governing Documents.

I hereby acknowledge and fully understand that my Governing Documents grant the Association **30 days** to review my request, from the date that my managing agent receives a full and complete Architectural Request Form.

> ***It is the responsibility of the homeowner to contact Community Property Management to confirm receipt of an Architectural Request Form. If the form is mailed, please follow up within seven (7) business days. If e-mailed, please follow up within three (3) business days to confirm receipt if you have not received a response. Contact: Kai Seymore, kai@cpm1.com or 805-987-8945.***

Each person on title to the property must sign below acknowledging that he/she has read, understands, and agrees to the above.

_____	_____
Homeowner Signature	Homeowner Signature
_____	_____
Homeowner Name (Please Print)	Homeowner Name (Please Print)
_____	_____
Date	Date

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NEIGHBOR AWARENESS FORM*

Left Rear Neighbor Name (please print) Address Signature	**Direct Rear Neighbor** Name (please print) Address Signature	**Right Rear Neighbor** Name (please print) Address Signature
Left Side Neighbor Name (please print) Address Signature	 **Property Address**	**Right Side Neighbor** Name (please print) Address Signature
Left Front Neighbor Name (please print) Address Signature	**Direct Front Neighbor** Name (please print) Address Signature	**Right Front Neighbor** Name (please print) Address Signature

**Not required for initial review. The Architectural Committee will provide written notice if this is required to complete the review of the request.*