SUNNYBROOK / SHADOW CREEK MANOR HOMEOWNERS ASSOCIATION Architectural Request Review Form

Pursuant to the provisions of the CCRs, detailed drawings, site plans, specifications, topographic elevations, drainage plans and requests for approval must be submitted to the ARC for approval. **An incomplete submittal package will delay the review process**.

Owners Name:		
Please print		
Property Address:		
	Street	City/State/Zip
Mailing Address (if different):		
	Street	City/State/Zip
Phone: (Home)	(Work)	(Cell)
	(110.11)	
Email Address:		
	ailable, list all improvem	of the following improvements to my property. Please print clearly, use nents and show all dimensions. Show distances from property lines, or nore room:
□ Antenna & Satellite Dishes		CHECKLIST
☐ Exterior Lighting		☐ County and/or City Building Permits.
□ Exterior Painting		☐ Original Submittal and Plans/Sketches.
 Landscaping Modifications 		
□ New Construction or Installation		☐ Use of Common Street for Storage of Materials or Use of
 Patio & Gazebo Installatior 	1	Construction Equipment Bond Check.
□ Pool & Spa Installation		☐ Use of Dumpster/POD Bond Check.
Security Doors & Windows		□ Number of Days Equipment and/or Dumpster will be on street
□ Solar Panels		·
□ Other		
I have attached copies of applica	ble plans for the improv	vements. (You should also submit, if necessary, County Building Permits)
DESCRIPTION		
COLORS		
		TECTIVE SHEETING IF USED FOR STOCKPILING OR WORK**
BLACKTOP/STREET/GUTTER/S	IDEWALK. ONLY <u>THE</u>	OR THE COSTS TO REPAIR ANY DAMAGE DONE TO THE ASSIGNED VENDOR IS APPROVED TO PERFORM STREET REPAIRS. AND WILL SCHEDULE THE REPAIRS. MINIMUM COST IS \$850.00
HOMEOWNER SIGNATURE:		
<u> </u>	Submit this are!	ication and plans, permits, etc. to:
	nance CAM 5135 Camii	no Al Norte. Suite #100, Las Vegas, NV 89031 2-331-4188 Email: <u>admin@pcam.vegas</u>
THIS SPACE BE	LOW THIS LINE IS FO	OR ARCHITECTURAL REVIEW COMMITTEE USE ONLY
		ARC Committee or Board of Directors Signatures:
Application Received:		
Bond Amount Required:		
ARC Action Date:		
□ Approved		
□ Denied		
□ Additional Information R	equired	
ARC Comments:		

SUNNYBROOK / SHADOW CREEK MANOR HOMEOWNERS ASSOCIATION Architectural Review Committee Submittal Checklist & Standards and Guidelines

ONE COPY OF ITEMS 1-6 ARE REQUIRED

	Architectural Request Review Form Form must be completed in its entirety. The Architectural Request Completion Form must be submitted within 30 days of completion of the stated project.				
	Plans, Permits, and Bonds Plans include elevation drawings of the improvement, size and types of materials to be used, a site plan depicting the improvement on the lot and in conjunction with property lines, the residence, and any other existing pertinent improvements. Accurate dimensions (height, length, width) must be shown. Exterior colors and finishes must be specified. Permits required by the City/County (i.e. pools, buildings additions, etc.) must be included. Should planned improvements require the removal or temporary removal of any exterior wall, a Designated Bond may be required. If a Bond is required it must be received by HOA Management prior to the commencement of any installation. Bonds are held in the name of the Association. If the Bond is insufficient to repair all such damage, then the additional cost and any related cost shall be assessed against the Homeowner as a Special Assessment.				
	Landscape Plans Landscape plans must be drawn to depict the lot, residence, property lines, existing walls, and fences. Landscape materials such as sod, tree and shrub types and sized must be called out, as well as their location. Irrigation and lighting must be shown Samples of decorative rock or the size and color of the rock must be included. Proposed hard scape areas (driveways, parking areas and sidewalks) must be shown.				
	Material Samples Color paint chips, type of rock to be used, pictures of gazebos, pools, patio covers and spas should accompany the detailed drawings when available.				
	Street and Common Area Protection Form Form must be signed and submitted with this application.				
	Architectural Review Committee Submittal Checklist & Standards and Guidelines Form must be signed and submitted with this application.				
	Information of Construction Company and/or Architect				
The imp	provements will be constructed by:				
Name:	Phone:				
	s:				
The Ard	chitect or owner's representative is:				
Name:	Phone:				
Addres					
obtain a MANOR complia	emply with all applicable Federal, State, and local laws, codes, regulations and requirements in connection with this work. I will any necessary governmental permits and approvals for the work. I understand and agree that SUNNYBROOK / SHADOW CREEK R HOMEOWNERS ASSOCIATION, its board of directors, its agent and the committee have no responsibility with respect to such ance and that the board of directors' or its designated committee's approval of this request shall not be understood as the making representation or warranty that the plans, specifications, or work comply with any law, code, regulation or governmental ment.				
You m	ust return this signed form to the Architectural Review Committee. By signing below you acknowledge that:				
0 0	The drainage on your property at this date is designed, installed and functioning properly. You indemnify the Association and all third parties from any damage resulting from your proposed improvements. Your proposed improvement may impair remaining developer warranties, if any.				
HOME	OWNER SIGNATURE:				
DATE S	SIGNED:				
PROPE	RTY ADDRESS IMPROVEMENTS WILL COMMENCE:				

SUNNYBROOK / SHADOW CREEK MANOR HOMEOWNERS ASSOCIATION Street & Common Area Protection Form

Owners Name:		
Please pri	nt	
Property Address:	Street	0.00
		City/State/Zip
Mailing Address (if differ	ent): Street	City/State/Zip
Phone: (home)		(cell)
Email Address:		
<u>I, THE HOMEOWNER, U</u>	JNDERSTAND THAT:	
STOCKPILING MATERI AND CLEANED DAILY F DAMAGE DONE TO AN	ALS, AND/OR DOING WORK ON THE FOR THE DURATION OF THE PROJE	PROPERTY, MUST BE PROTECTED, IF USED FOR E PROJECT. I WILL ENSURE THE STREET IS CLEARED CT. ADDITIONALLY, I WILL BE RESPONSIBLE FOR ANY THER PROPERTY AFFECTED DURING THE PROGRESS
IF ANY PROPERTY IS I	DAMAGED DURING THE PROGRESS	OF THIS PROJECT, I UNDERSTAND I WILL BE
RESPONSIBLE FOR FU	JNDING THE REPAIR OF THAT DAMA	AGE THROUGH A SPECIAL ASSESSMENT, IF
NECESSARY, AS DEEN	MED APPROPRIATE BY THE MANAG	EMENT INSPECTOR, MANAGEMENT PERSONELL,
CONTRACTED VENDO	RS, AND THE BOARD OF DIRECTOR	rs.
		RENT CONTRACTED VENDOR WITH REFERENCE TO
THE COMMON AREA T	HAT HAS BEEN DAMAGED, WHO WA	AS/IS, CURRENTLY, HIRED BY THE BOARD OF
DIRECTORS TO PERFO	ORM MAINTENANCE AND REPAIR TO	O THE COMMON AREA AFFECTED BY
AFOREMENTIONED RE	EPAIR.	
HOMEOWNER SIGNATUR	RE:	
	PROVEMENTS WILL COMMENCE:	

SUNNYBROOK / SHADOW CREEK MANOR HOMEOWNERS ASSOCIATION Architectural Completion Form & Bond Refund Request

Quinara Namai	-	on Form & Bond Refund Request	
Owners Name: Plea	se print		·····
Property Address:			
	Street	City/State	/Zip
Mailing Address (if diffe	erent):		
•	Street	City/State	/Zip
Phone: (Home)	(Work)	(Cell)	
Email Address:			
		o our property in compliance with all required	
SHADOW CREEK MA	NOR HOMEOWNERS ASSOCIATION	ARC Guidelines and have included pictures of t	ne project.
□ Antenna & Sa			
Exterior Light			
Exterior Paint			
□ Landscaping	Modifications ction or Installation		
	ction of installation bo Installation		
□ Security Door			
□ Solar Panels	3 & Williadws		
□ Patio & Gazel □ Pool & Spa In □ Other	ction or Installation bo Installation stallation		
HOMEOWNER SIGNA DATE SIGNED:			
PROPERTY	ADDRESS	IMPROVEMENTS	COMMENCED:
THI	Performance CAM 5135 Camino 702-362-0318 Fax: 702-3	s completion form to: Al Norte. Suite #100, Las Vegas, NV 89031 31-4188 Email: admin@pcam.vegas ARCHITECTURAL REVIEW COMMITTEE USE	ONLY
Completion Form R			
Bond Amount Rece	eceived:		
	eceived:ived:		
Inspector Comment	ived: s:		
Inspector Comment Date Reimbursed: _	s:		
Inspector Comment Date Reimbursed: _	ived:		
Inspector Comment Date Reimbursed: _ Check Number:	s:		
Inspector Comment Date Reimbursed: _ Check Number: Requested By:	s:		