

AVILA PARK CONDOMINIUM ASSOCIATION ARCHITECTURAL REVIEW FORM
REQUEST FOR APPROVAL OF REMODELING PLANS

Please sign and deliver this completed form and requested documents to the Avila Park Board of Directors c/o mworkman@weststarmanagement.com .

NAME: _____

ADDRESS: _____

PHONE CONTACT: _____

EMAIL ADDRESS: _____

Please briefly describe your proposed construction or remodeling project: _____

ATTACH PLANS AND SPECIFICATIONS: Include heights, widths, depths, types of materials, color (for exterior projects), locations, and any other relevant information that will assist the review process.

Approval is based on conformance with the Avila Park guidelines and THE RESOLUTION of the AVILA PARK CONDOMINIUM ASSOCIATION, INC. UNIT, BALCONY and STORAGE UNIT IMPROVEMENT POLICY.

I understand that the approval of the Avila Park Board of Directors must be obtained before I can proceed with my project. I understand that approval by the Board does not constitute approval by the local building department or any other agency that may require prior approvals. I understand I may be required to obtain permits and licenses, pay fees, or obtain other professional opinions and/or certifications. I agree to complete all improvement as they are submitted and understand that I must submit another request if modifications to these plans become necessary. I agree to complete the improvements promptly and in a food workmanlike manner.

Unit Owner's Signature: _____ Date: ____/____/____

THIS AREA TO BE COMPLETED BY AVILA PARK BOARD OF DIRECTORS

DATE RECEIVED: ____/____/____

DATE APPROVED OR DENIED: ____/____/____

Approved as Submitted

Approved with Conditions

Denied as Submitted

Signature

Conditions for Approval (use reverse side if necessary):

Reasons for Denial: (use reverse side if necessary):
