

ARCHITECTURAL APPLICATION

SEND TO: CID Management, Inc., 5011 Clayton Road, Concord, CA 94521

Date _____

Name _____

Unit Address _____

Mailing Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____

We request approval of the following:

*Please include scaled drawing and location on property of improvement(s) and specifications as to materials to be used and finish color.

The work will be done by:

Contractor's Name _____

Address _____

License # _____ Phone # _____ Cell# _____

1. I understand that, if this application requires work of a contractor, I must choose a licensed, bonded, and insured contractor.
2. I further understand that, if approval of this improvement is given, I will be responsible to indemnify the association and hold it harmless from any damages or costs of a lawsuit that are filed due to the installation, construction, or presence of the described improvement.
3. I understand that I am responsible to maintain the improvement.

Signed _____ Print Name _____

APPROVED AS SUBMITTED – DATE _____ ARCHITECTURAL COMMITTEE

APPROVED AS NOTED BELOW BY _____ DATE _____

REVISE & RESUBMIT BY _____ DATE _____

NOT APPROVED BY _____ DATE _____

Approved work must be completed within _____(____) months of approval or resubmission for review and approval is required. All approvals are contingent upon homeowner acquiring all applicable permits required for the work.

NOTES/CONDITIONS: (If you need more room write on the back.)