Walnut Park at WC HOA
APPLICATION FOR ARCHITECTURAL REVIEW AND APPROVAL

Window Replacement – Milgard, Styleline – Dual paned white vinyl – no grids

Date_____ Name_____
Address_____
Home phone_____Work Phone_____

We request approval of the following:
_____
_____
_____
_____
_____
_____
*Please include scale 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 #_____

1. I understand that if this application requires work of a contractor, that I must choose a licensed, bonded, and insured contractor.
2. I further understand that if approval of this improvement is given, that 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 _____ 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:_____
_____
_____
_____