



Woodridge Mutual Water & Property Owners Corporation

P.O. Box 8 | Shingletown, CA 96088 | woodridge96088@gmail.com

DESIGN REVIEW COMMITTEE APPLICATION FORM

Please fill in the following information and provide all the relevant attachments such as plans/drawings and permits to the Design Review & Architectural Committee through WMWPOC's general email address: woodridge96088@gmail.com or by mail to PO Box 8, Shingletown, CA 96088

A response will be provided to the applicant in accordance with WMWPOC's CC&Rs (*Second Amended & Restated Covenants, Conditions, and Restrictions, recorded December 20, 2023*), which is within 60 days of receipt of this Application Form together with the relevant attachments and supporting documentation.

Lot Owner Name _____

Lot Address & Lot Number _____

Construction Start Date: _____

End Date (Estimated) _____

New Single Family Home Construction

Architectural Plans Submitted

Yes

No

Shasta Building Permit Submitted

Yes

No

Expiration Date _____

Plot Map Submitted

Yes

No

Number of Structures (House / Outbuildings / Sheds / Detached Garage / Storage) _____

List Type of Structures _____

Set Backs Conform to Wildlife Corridor

Yes

No

Set Backs Conform to Easements

Yes

No

Set Backs Conform to Adjacent Lots

Yes

No

Primary House Square Footage (livable) Conforms to CC&Rs (1,630 square feet)

Yes

No

Exterior Plans (landscaping) Submitted

Yes

No

Exterior Color Scheme Conforms to CC&Rs

Yes

No

Additional Construction

Exterior Addition (attached to primary house structure)

Type of Exterior Addition _____

Shasta Building Permit Required	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Shasta Building Permit Submitted	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Set Backs Conform to Wildlife Corridor	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Set Backs Conform to Easements	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Set Backs Conform to Adjacent Lots	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Expiration Date _____

Out Building Construction

Type of Out Building Construction _____

Shasta Building Permit Required	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Shasta Building Permit Submitted	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Building Plans / Drawings Submitted including exterior color scheme	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Set Backs Conform to Wildlife Corridor	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Set Backs Conform to Easements	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Set Backs Conform to Adjacent Lots	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Signature _____

Date _____

INTERNAL USE ONLY

Reviewed By _____ Date _____

Approval Yes No

If No, Recommendations / Resubmission _____

Approved By _____ Date _____

Approved By _____ Date _____