

SOUTH COAST SHORES HOMEOWNERS ASSOCIATION
ARCHITECTURAL IMPROVEMENT APPLICATION

SECTION 1: HOMEOWNER INFORMATION: *(Please Print Clearly)*

Name: _____ Date: _____

SCS Address: _____

Home Phone: _____ Work Phone _____

Name of Contractor: _____ Phone: _____

Address of Contractor: _____

Start Date: _____ Completion Date: _____

Nature of Improvement: _____

(Attach All Necessary Plans)

SECTION 2: CONTRACTOR INFORMATION: The following documents are required with the application.

- 1) Copy of California State Contractor License or Termite Repair Licensing
- 2) ACORD Certificate of Liability Insurance (\$1 million minimum)
- 3) Certificate of Worker's Compensation Insurance

SUBMISSION: Attach the necessary plans and contractor information to this form and deliver to the SCS Architectural Committee thru Optimum. Ensure that the legal owner of the property signs below.

APPROVAL PROCESS: The Committee will review the request and, if approved, the form will be returned to the homeowner. **WORK MAY NOT COMMENCE UNTIL THIS OCCURS.** If the request is denied, a letter will be forwarded to the homeowner stating the objections to the request.

NOTE: It is the responsibility of the homeowner to determine if a City permit is required for this project and to obtain same. If City permit is required, Association final approval is dependent on submitting a copy of the permit to the Association.

The information given above, including attachments, is complete and accurate to the best of my knowledge.

Signature of Legal Owner _____ Date: _____

SCS APPROVAL SECTION: **PLEASE DO NOT WRITE IN THIS AREA**

Special Approval Conditions:

