## **Woodlake Homeowners Association**

C/O C & C Property Management

## APPLICATION FOR ARCHITECTURAL / LANDSCAPE REVIEW

Owner Name:		Date:
Address:		Phone Number:
Proposed Architectural / Landscape Changes: Please attach any relevant details, plans, drawings, or photo		
Work to	o be performed by:	
Start Date:		Completion Date:
Owners	Signature:	Date:
By sign	ing above, the applican	t acknowledges the following:
1.		pleted form does not constitute approval. The Board of Directors
2.	Approval of this applic	d committee may require additional information. Eation does not constitute approval by the local municipal building hall be responsible for complying with local building codes and
3.	obtaining all necessar Owner is responsible f	y permits. for re-submitting any substantive changes of the proposed work
	Approved	
	Approved with the foll	owing conditions:
	Denied for the following	ng reasons:
Board o	of Directors Signatures:	
		Date:
		Date:
		Date:

Please return completed form to:

**Woodlake HOA** C/O C & C Property Management 425 Merchant Street Suite 101 Vacaville CA 95688

(707) 447-6088 (707) 447-2831 FAX