

Oceana Mission IV Architectural Request Form

Please fill out the form completely on both sides and submit it to the Architectural Committee.

Homeowner Name: _____ Date: _____

Address: _____

Mailing address (if different from above) _____

Email address: _____

Home Phone: _____ Cell Phone: _____

Description of proposed changes: (use additional paper if necessary and attach to this form)

Full description of project including materials, color, location, size/dimensions and drawings or pictures. When owners install solar panels on their roof, they are responsible for any damage or roof leaks as a result of the solar install.

I (we) understand that if this is approved by the Architectural Committee, such approval is based solely on aesthetics (compatibility with the appearance of the community as a whole); That such approval is not a certification that the owner has complied with building code requirements or has obtained a building permit if required. I (we) the undersigned therefore, hold myself (ourselves) solely responsible for ensuring that the construction meets building code standards as well as for obtaining any permit or permits which may be required by the City of Oceanside. A copy of the permit will be submitted with this Architectural form.

I (we) do hold harmless the Architectural Committee, the Board of Directors and Oceana Mission Unit No. IV Homeowners Association for any injury of any kind to myself (ourselves) or any other person or animal or any living creature resulting directly or indirectly from the construction of the requested project(s), as well as for any material damages which may occur to my (our) property or the property of others as a result of any construction. All cost associated with moving any existing irrigation, will be the homeowners responsibility.

Homeowners Signature: _____ Date: _____

Architectural Committee Action

() Approved () Not Approved () Conditions (if any on reverse side)

Architectural Committee signatures. (min. 2 committee signatures required for approval)

1. _____ 2. _____

3. _____ Date Approved: _____

Neighbor Notification: (both sides, below, front or back of your unit)

	() yes () no	
Name and Address	Objection	Signature

	() yes () no	
Name and Address	Objection	Signature

	() yes () no	
Name and Address	Objection	Signature

Additional comments can be attached to this form.

Architectural Committee Conditions:

Diagram: