SUNDANCE TOWNHOMES ASSOCIATION

ARCHITECTURAL CHANGE APPROVAL APPLICATION

(ALL WORK MUST START WITHIN 3 MONTHS AFTER APPROVAL OR APPLICATION WILL BE CANCELLED)

Homeowner Name:			
Property Address:			
Mailing Address:	Hame Phane	E-mail:	
work r none.	none i none.	E-man.	
 Description of what is being Photo, drawing, diagram or b Manufacturer's name, model 	lueprint showing related products, arch, style, color, material specifications or	nitectural modifications and location.	
Proposed Start Date:	Proposed Completion Date:		
of terms returned I shall comply I must obtain	to the Association. Twith any conditions of approval as spall required approvals and permits from	ce until written approval has been granted, and my ecified in the written approval. In the applicable governmental authorities. In the application is received by the Association	-
Owner's Signature :		Date :	
Approved:		Date:	
PLEASE CALL TRANS	PACIFIC MANAGEMENT SER FOR A VISUAL I	VICE UPON COMPLETION OF YOUR P NSPECTION	'ROJEC'
ARC sign off on completed we	ork:	Date:	

Mail, Fax or Email completed form to: Sundance Townhomes Association c/o Management Trust - Transpacific 12607 Hiddencreek Way Suite R Cerritos, Ca 90703-2146

Phone: (562) 926-3372 ext 1307• Fax: (562) 926-8555 • E-mail: val.cuonzo@managementtrust.com

Revised: 02/19/13

PLEASE FILL OUT THE 1.0 HOMEOWNER/PROPERTY INFORMATION AND SUBMIT IT WITH THE SUNDANCE ARC REQUEST FORM.



City of Cerritos Department of Community Development Civic Center • 18125 Bloomfield Avenue P.O. Box 3130 • Cerritos, California 90703-3130 Phone: (562) 916-1201 • Fax: (562) 916-1371 www.cerritosgis.com • www.cerritos.us

HOA APPROVAL FORM

For all properties located within a homeowners association (HOA), written HOA approval is required prior to obtaining plan approval and/or building permits from the City of Cerritos. This form must be completed and submitted together with the required planning/permit application for all exterior work. Although separate HOA approval letters and/or signature stamps may be submitted as supplemental information, a completed copy of this form is still required.

1.0 HOMEOWNER/PROPERTY INFORMATION				
1.1 Name(s):	1.2 Phone number:			
1.3 Property address:				
1.4 What type of exterior work is being performed? Exterior painting Exterior remodel (change in materials or architectural style; no added square footage) Front yard or driveway improvements New/replacement residence	☐ Re-roof ☐ Room addition			
1.5 Homeowner's signature:	Date:			
2.0 HOA INFORMATION/APPROVAL				
This section must be completed by an authorized HO	OA representative.			
2.1 HOA Name:	SUNDANCE			
 2.2 Check one: HOA approval IS required for one or more of the items checked 2.3 through 2.8 below. IS NOT required for any of the items checked only. 2.3 What is the highest level of review and approval checked in Section 1.4 above? Check one: 	d in Section 1.4 above. Complete Section 2.8			
☐ Board of Directors ☐ Architectural/Design Review Committee ☐ Property Manager ☐ Other (please describe):				
2.4 HOA approval noted in Section 2.3 above was granted on				
2.5 Check one: Conditions of approvalWERE imposed on the project and are attachWERE NOT imposed on the project.	, , ,			
2.6 Said approval is for plans with the following date or revision number: (date or revision number)				
2.7 Check one: If plan modifications are required by DO require further review and approval by th DO NOT require further review and approval	the City, then the plans he HOA. (Submit a new copy of this form to the City.)			
2.8 Authorized HOA signature:	Date:			
Printed Name:	Title:			
FOR OFFICE Received on (date):	Project Ref. Number: A/P#			