



HOME IMPROVEMENT FORM

IX. EXHIBIT A – Home Improvement Form

Submit Applications to:
Arrowood Master Association
c/o Avalon Management
3618 Ocean Ranch Blvd
Oceanside, Ca 92056
(760) 481-7444

Name: _____

Address: _____

Email Address: _____

Phone: _____

Signature: _____

SUBMITTAL CHECK LIST: (Please include the following)

- _____ Home Improvement Form (Exhibit A)
- _____ Impacted Neighbors on Statement (Exhibit B)
- _____ 2 Sets of drawings which must include details of size (dimensions), design, color and materials. Location of drains must be included on drawings.
- _____ Photographs of the dwelling and specific area impacted by the proposed improvement. The images should include a wide-angle version to provide context of the location in reference to the house.
- _____ Payment, if applicable, for Landscape Architect Firm Review (see payment schedule page 5) There will be NO fee if reviewed by the DRC. Payments should be made payable to Arrowood Master Association.
- _____ Names of plants should include the common name and not Latin Names

PROJECT BEING SUBMITTED: (please check appropriate items)

ARCHITECTURAL

- _____ Awnings
- _____ Deck (wood)
- _____ Gazebo
- _____ Green House
- _____ Patio Cover
- _____ Patio Slab
- _____ Painting
- _____ Rain Gutters
- _____ Solarium
- _____ Addition/Extension
- _____ ADU/JADU
- _____ Other: _____

LANDSCAPE/HARDSCAPE

- _____ Landscape:
 - _____ Front
 - _____ Rear
 - _____ Trees (type/location)
- _____ Hardscape Only
- _____ Fence(s)/Walls:
 - _____ Front
 - _____ Rear
 - _____ Retaining
- _____ Drains

EQUIPMENT

- _____ Air Conditioner
- _____ Built-In Barbecue
- _____ Lighting
- _____ Pool & Equipment
- _____ Spa & Equipment
- _____ Swingset/Playhouse
- _____ Waterfall/Fountain

OTHER

ARROWOOD MASTER ASSOCIATION

XI. EXHIBIT D - Neighbor Notification Statement

NEIGHBOR NOTIFICATION STATEMENT

The attached plans were made available to the following neighbors for review:

Neighbor (Rear)	
Name _____	Phone _____
Address _____	
Signature _____	Date _____

Neighbor (Rear)	
Name _____	Phone _____
Address _____	
Signature _____	Date _____

Common Area or Back Yard - Rear of Home

Adjacent Neighbor (Left)	
Name _____	Phone _____
Address _____	
Signature _____	Date _____



Adjacent Neighbor (Right)	
Name _____	Phone _____
Address _____	
Signature _____	Date _____

Your Street - Front of Home
(If front yard or front of home is altered)

Facing Neighbor	
Name _____	Phone _____
Address _____	
Signature _____	Date _____

Facing Neighbor	
Name _____	Phone _____
Address _____	
Signature _____	Date _____

Facing Neighbor	
Name _____	Phone _____
Address _____	
Signature _____	Date _____

My neighbors have seen the plans I am submitting for approval (see above verification). If any neighbor has a concern, they should notify Avalon Management in writing. Neighbor objections do not mean the plans will be denied, although their concerns may be considered by the reviewing party. Please note that this is not seeking the neighbors' approval, rather it serves to alert them that the attached information is under consideration by the DRC and will commence if approved so that they may make whatever accommodations they feel is necessary.

SUBMITTED BY: Name: _____ Date: _____

Address: _____

NOTICE OF COMPLETION

EXHIBIT C

ARROWOOD MASTER ASSOCIATION

Notice is hereby given that the undersigned is the Owner of the property located at:

Address:

City and Zip:

The work of Improvement on the described property was COMPLETED on:

_____ day of _____, 20____, in accordance with the
Architectural Review Committee's written approval through the above owners plans and
submitted package.

Description of Completed Work: _____

OWNER'S SIGNATURE:

OWNER'S NAME (PLEASE PRINT):

DATED: _____

UPON COMPLETION OF IMPROVEMENTS MAIL TO:

Arrowood Master Association
c/o Avalon Management
3618 Ocean Ranch Blvd.
Oceanside, CA 92056