



Forward To:
LOS PASEOS MAINTNENACE CORPORATION
C/O Tritz Professional Management Services
1525 E. 17th Street, Suite A
Santa Ana, CA 92705
Email: Gricelda@tpms.net

Lot#: _____

Tract: _____

Artificial Turf Architectural Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address

Rancho Santa Margarita CA 92688
City State ZIP Code

Phone: _____ Email _____

Best Way to contact: Phone Text Email Mail

Homeowner Signature: _____

**Signature acknowledges that applicant CANNOT commence project until approval from Los Paseos Maintenance Corporation & SAMLARC is obtained.*

Artificial Turf Installation Details

Approximate Start Date: _____ Finish Date: _____

Company Name: _____

Company Website: _____

Artificial Turf Project Details

Is this a new installation or a replacement for existing artificial turf? New Replacement

Is this project for a lawn installation or dog run/putting green? Lawn Dog Run Putting Green Sport Court

Guidelines:

Rear/Side Yard (putting greens, dog runs, sport court surfacing and residential lawn areas): Where rear or side yard property line (neighbor-to-neighbor) is transparent without fencing, a 3 foot minimum width planting buffer shall be constructed against property line.

Front yard: A 2 foot minimum width setback shall be provided against the house wall for shrub foundation planting. A 3 foot minimum width setback from the back of sidewalk, back of street curb, or side yard property line at neighboring front yard for shrubs and trees as transition landscape buffer. Surface grading shall not exceed 3 feet horizontal to 1 foot vertical.

Is the Artificial Turf of a type "infield" (does not apply to dog runs or putting greens)? YES NO

Is the Artificial Turf UV Stabilized? YES NO

Polyethylene blades (piles of 1.5 – 2.5 inches or higher)

Polypropylene blades (piles of 1.5 – 2.5 inches or higher)

Is the color of the Artificial Turf dark green? YES NO

If no, indicate color of Artificial turf for consideration _____

Does the Artificial Turf have a minimum 8 year warranty? YES NO

Is a sample of the artificial turf attached/enclosed showing the engineering/quality? YES NO

***Installation MUST be installed per the manufacturer's recommendation over a compacted sub-base and aggregate base. Surface shall be graded to drain as natural gras lawn with smooth transitions to area drains or paved surfaces.**

Requirements:

1. Artificial turf must provide an adequate base and drainage system as defined by the manufacturer.
2. Must be adequately secured, with no visible ripples or seams.
3. Artificial turf must be kept free of weeds, debris, holes, dents, stains, discoloring, and be regularly maintained.
4. Artificial turf must be separated from other adjacent neighbors landscaping by mow strips or other approved barriers to prevent intrusion of living material into the areas of Artificial turf.
5. Artificial Turf must have finished edges.
6. Artificial Turf is not permitted on slopes steeper than 3:1.
7. Manufacturer must indicate that Artificial Turf has been tested for lead.
8. Artificial Turf cannot use crumb rubber.

I certify that all above requirements have been met by the Manufacturer chosen for my project. YES NO

Insert Drawings Below (or attach additional sheets if necessary):

Impacted Neighbor Statement/Neighbor Awareness

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

NEIGHBOR AWARENESS – The intent of this form is not to obtain neighbor approval but is to advise your neighbors who own property adjacent to or near your lot (property) line or unit. Neighbors must sign this form and may add their comments in the space provided below.

FACING NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____

FACING NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____

FACING NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____

ADJACENT NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____

ADJACENT NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____

IMPACTED NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____

IMPACTED NEIGHBOR:

Full Name: _____ Date: _____

Address: _____ Phone: _____

Signature: _____

Disclaimer and Signature

The neighbors have seen the plans I am submitting for Architectural Review Committee approval (see above verification). I understand neighbor objections do not in themselves cause denial. However, the Architectural Review Committee will contact the neighbors to determine their appropriateness, if necessary. I certify that my answers are true and complete to the best of my knowledge.

I understand that NO WORK is to commence until approval is received from the Architectural Review Committee.

Signature: _____ Date: _____