



Revised Date: 7/26/2021

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

HOME IMPROVEMENT 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.*

Installation Details

Approximate Start Date: _____ Finish Date: _____

Please check appropriate box

- Air Conditioner
- Antenna / Dish
- Awnings
- Deck
- Drains
- Door / Screen door
- Gazebo
- Green House
- Gutters

- Roof / Solar Panels
- Landscape / Hardscape
- Outdoor Lighting
- Patio Cover
- Play structures
- Trees
- Walls / Retaining walls
- Water Feature / Pond

※ **See respective application for the following**

- | | |
|-------------------|------------------|
| - Artificial Turf | - House Painting |
| - Fence | - Windows |

Installation Project Details

Is this a new installation or a replacement?

New

Replacement

Type of materials used:

Included with submittal is a full design of your project installation describing and including the elevation view and details?

YES

NO

Included are samples of material, paint or stain.

YES

NO

Landscape: Please provide a drawing / sketch of full area to have new landscaping, showing locations of items. Must indicate any and all trees with their locations and indicate that Root Barriers will be used. Must include ALL types of plant materials, natural Lawn and lawn type, groundcovers including, plants, mulch, loose stone, other. Must show existing drainage, and include any new drainage being added. All yards must have adequate drainage and drain through the grate at the rear of the home, into the alley.

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: _____ (Owner / Tenant)

FACING NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____ (Owner / Tenant)

ADJACENT NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____ (Owner / Tenant)

ADJACENT NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____ (Owner / Tenant)

IMPACTED NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____ (Owner / Tenant)

IMPACTED NEIGHBOR:

Full Name: _____ Date: _____
Address: _____ Phone: _____
Signature: _____ (Owner / Tenant)

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: _____