

Whispering Hills Community Association Request for Architectural Approval

I. Owner Section

Date submitted: _____

Owner's name: _____

Address: _____

Daytime phone number: _____

Description of improvement: _____

Items attached: _____

Notice: Architectural approval from the Association does not relieve owner from obtaining the required building permits. Approval must be received in writing prior to commencement of any improvement.

II. Neighbor Approval:

Minimum of three adjacent neighbor's signatures with addresses

1. Name: _____ Address: _____

2. Name: _____ Address: _____

3. Name: _____ Address: _____

4. Name: _____ Address: _____

5. Name: _____ Address: _____

III. Committee Section:

Recommendation: _____

Conditions of recommended approval: _____

Reasons for recommended disapproval: _____

Date: _____ Signature: _____

Chairperson

IV. Board of Directors section:

Decision: _____

Conditions of approval (if any): _____

Date: _____ Signature: _____

Please send the completed application with the two sets of complete plans showing all specifications, materials, and locations to: KPPM, 16845 Von Karman Ave, Suite 200 Irvine, CA 92606. After review by the Committee, one set will be returned to you, and the Association will retain one set.