## ASPEN CREEK COMMUNITY ASSOCIATION

C/O: TSG Independent Property Management, Inc. 27129 Calle Arroyo, Ste. 1802, San Juan Capistrano, CA 92675

Office: (949) 481-0555 / Email: general@tsgindependent.com (Correspondence Only-No Applications)

## ARCHITECTURAL APPLICATION – EXTERIOR PAINT

\*\*Application MUST be received 1 week prior to meeting or may not be approved until following month\*\*
FAILURE TO OBTAIN THE PRIOR APPROVAL OF THE ARCHITECTURAL REVIEW COMMITTEE CONSTITUTES A VIOLATION OF THE
CC&R'S AND MAY REQUIRE MODIFICATION OR REMOVAL OF UNAUTHORIZED WORK OR IMPROVEMENTS AT YOUR EXPENSE

OWNED INFOR	MATION: Applications for i	Suprementation of the Annual by the Aspen Cucak C.A.
		improvements must be Approved by the Aspen Creek C.A. Application to the Master Association for review.
Property Owner:		
Property Address:		
Phone Numbers:		
<u>-</u>	Home	Cell / Work
Email Address:		
Mailing Address: (If Different from above)		
EXTERIOR PA	AINT SPECIFICATION	IS: *Current Picture of Home Required
it can be processed. I *MUST Include: Pair	Review timelines will not commer nt Color Samples/Color Brochure	ay & Require Resubmission of Completed Application Before nee until and unless a complete application is received. e even if select from Current Color Scheme & Current Photo or Cannot Be Processed! <i>Hard Copies Only! NO Emails</i>
	· · · · · · · · · · · · · · · · · · ·	UST supply Paint Color Swatches or Brochure for
each color; <u>Even</u> Accent colors are for fro be asked to resubmit w ark pro/aspen-creek/a	if Select Current Online Co nt or side garage door. Some darker c vith new colors if they are no long (spen-creek) Other Brands/Colors a	color Scheme or if keeping existing house colors. colors are no longer being approved. If current colors are dark you may wer allowed. (https://www.dunnedwards.com/colors/archive/color- re Optional with No Guaranteed Approval.*To Prevent Delays with rubmitting Multiple Color Scheme Options in Order of Preference.
Online Color Schem	e:	Example Homes Address:
		Wood Siding:
	<u>t</u> (Hides Imperfections)	*Sheen Options (Circle): Satin/Low or Semi-Gloss
Wood Trim: <u>*Sheen Options</u> (Circ	cle): Satin/Low or Semi-Gloss	Wood Fence: <u>*Sheen Options (Circle): Satin/Low or Semi-Gloss or Stain</u>
Large Garage Door:	cle): Satin/Low or Semi-Gloss	Wood Gate: *Sheen Options (Circle): Satin/Low or Semi-Gloss or Stain
	ciej: Saun/Low or Semi-Gioss	Front Door:
	cle): Satin/Low or Semi-Gloss	*Sheen Options (Circle): Satin/Low or Semi-Gloss
Accent Color(s) (if ap	pplicable):	
Wrought Iron Fence	e/Gate Color (if applicable):	
CURRENT HOU	ISE COLORS: *MUST in	clude <u>Current</u> Color Photograph of home.
Stucco:		Wood Siding (if applicable):
Trim:		Wood Fence:
Large Garage Door:		Wood Gate:
Side Garage Door: _		Front Door:
Accent Color(s) (if ap	pplicable):	
Wrought Iron Fence *Receive a Discount for	e/Gate Color (if applicable):	om Dunn Edwards Paint Using <u>Discount Code</u> # 188524-000

<b>Property</b>	Address

## **NEIGHBOR AWARENESS**: (Surrounding/Not Just Impacted Neighbors)

\*3 <u>Signatures</u> Required and Must be Property Owners Signatures or application will not be processed.

Your signature indicates that you are aware of the modifications/construction that your neighbor is planning on making. If you have any concerns or objections to these plans, you may submit them in writing to the Management Company at the email or mailing address listed on the front page of this application. Note that owners do not have authority to consent to or deny an application or change. This form is for notification and awareness purposes only. While an owner may object in writing, that objection is not determinative and may only be considered by the Board in reviewing the application.

FACING NEIGHE	NEIGHBOR IMPACTED NEIGHBOR		
Name:		Name:	
Address:		Address:	
Phone:		Phone:	
Signature:		Signature:	
ADJACENT NEIGHBOR 1		ADJACENT NEIGHBOR	<u>. 2</u>
Name:		Name:	
Address:		Address:	
Phone:		Phone:	
Signature:		Signature:	
Comments:			
No re I I I Al (12 car RE Cc I I u an ap Th Ar Ho ap Submitted By:	D AND I AGREE: (Homeowner D work on this request shall commer revived. *I UNDERSTAND DAILY FAIL TO FOLLOW THIS GUIDEL I improvements approved by the Asso (20) days after approval. Failure to concuse the approval to be AUTOMATICA EQUIRED. Extenuating circumstances immittee/Board of Directors in writing inderstand this application does not talk door state approvals or permits for the provals /permits must also be obtained as neighbors are aware of construction chitectural Approval. I understand newever, the Association may contact the plicable, if necessary.	rice until written approval of FINES MAY BE ASSESSE.  INE.  ciation must be completed with a property of the work within the property of the attention of the attention of the management Comparate the place of obtaining any rese improvements. All city, contained and have reviewed the plans ighbor objections do not, in the second of the second of the plans ighbor objections do not, in the second of the second of the plans ighbor objections do not, in the second of the second of the plans ighbor objections do not, in the second of	thin one hundred twenty escribed period of time will MISSION WILL BE ntion of the Architectural ny. required local city, county, unty or other governmental I am submitting for hemselves, cause denial.
Print Name	Signature		Date
Property Address:			
Phone:	E	mail:	

Exterior Paint Applica	ition, Page 3		
<b>Property Address:</b>			

## TO BE COMPLETED BY THE BOARD OF DIRECTORS ONLY:

ASSOCIATION APPROVAL AND COMMENTS:			
( ) Approved with No Conditions	( ) Approved with Conditions		
Comments/Conditions:			
( ) Denied			
Reason:			
( ) Need More Information Prior to Approval			
Information Needed:			
( ) Resubmit Application with Requested Informati	on		
ASSOCIATION SIGNATURES: (Two Signatures Re	equired)		
Signature	Date		
C:	Data		
Signature	Date		
( ) Inspection After Completion of Improvements			
Comments:			
( ) Meeting Onsite before Final Approval:			
Inspector's Signature:	Date:		