

ARC FORM

Inspiration at the Villages Homeowners Association
PROPERTY IMPROVEMENT APPLICATION

NAME: _____ DATE: _____

ADDRESS: _____ Proposed Completion Date: _____

PHONE: _____ EMAIL: _____

All Applications Must Be Submitted With A Plan To Scale

TYPE OF ARCHITECTURAL AND/OR LANDSCAPING IMPROVEMENT

___ Remodeling/Additions

___ Outside Walks/Stairs

___ Screen Door

___ Solar

___ Window-Shade Screens

Materials to be Used:

Additional Comments: _____

___ Landscaping Improvements*

*All plants should be planted a minimum of 3' from any wall and trees should be planted 5' from any wall. Owners will be responsible for excess water/overspray from irrigation causing damage to the perimeter walls.

___ Satellite Dish/Antennae

___ Other- _____

___ PAINTING:

Doors – New Color ___ Railings – New Color ___

Body – New Color _____ Trim – New Color _____

Attach new paint color samples for stucco, trim, fascia and/or wall.
No approval is required to repaint in exactly the same colors as existing colors

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE THE REVERSE SIDE OF THIS FORM.)

For Association Use Only:

___ Approved ___ Not Approved ___ Conditionally Approved

Comments: _____

Approved By: _____ Date: _____

EXHIBIT B

NEIGHBOR AWARENESS SIGN-OFF FORM

To expedite the processing of your application, please show and explain your plans to all those neighbors who may be affected and have them sign below indicating they are aware of the project. The Architectural and/or Landscape Committee may also contact them directly if the scope of the project warrants such action.

NEIGHBOR AWARENESS: The neighbor's approval is not necessarily a condition to your improvement/modification being approved by the Committee. The intent is to advise your neighbors who own property within close proximity of your lot and may be affected by your proposed improvement(s). This requires their signatures below. This means that the signatures below indicate your neighbor's awareness of this application. No application will be considered complete until there is evidence that any neighbors who may be affected have been made aware of this application.

NEIGHBORS: I have reviewed the plans of _____
(Please Print)
and I am aware of their proposed improvements shown on the attached plans.

NAME (Print)	SIGNATURE	ADDRESS	PHONE	DATE
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

PLEASE RETURN FORM AND PLANS TO:

**INSPIRATION AT THE VILLAGES COMMUNITY ASSOCIATION
ATTENTION: ARCHITECTURAL/LANDSCAPE COMMITTEE
C/o P&G Association Management
129 W Lake Mead Pkwy Suite 16
Henderson, Nevada 89015
PHONE 702-202-4330 ~ FAX 702-202-3910
Email: Joan@pandgmanagement.com**

Additional Space for Comments: (please attach any pertinent drawings, permits, etc)