# **ARCHITECTURAL REVIEW PROCEDURES**

The attached Architectural Review Package contains an Architectural Change Request form, Indemnity Agreement, Neighbor Awareness Letter, Site Plan and Instructions.

Ensure to carefully review the ARC Guidelines prior to submitting your application.

All Exterior & interior improvements to your property must be submitted to the Architectural Review Committee:

 Submit one (1) <u>completed</u> copy of the Architectural Change Request Form, Indemnity Agreement, Neighbor Awareness Letter, and Detailed Site Plan/Drawings. Applications are to be submitted by the homeowner using the email below:

## General@epicamlv.com

- Upon submission of your completed application with all required documents, your plans will be reviewed by the Committee. You will receive written notice of their approval, rejection, or conditional approval within sixty (60) days of review.
  - 3) A photo of the completed project must be submitted within ninety (90) days of approval.

Drawings must include location and screening of equipment, dimensions/measurements, site plan, setbacks, materials, colors and any information pertinent to the proposed improvements such as brochures, pictures, etc.

CONSTRUCTION IS NOT TO BEGIN UNTIL WRITTEN APPROVAL OF PLANS IS OBTAINED BY THE ARCHITECTURAL REVIEW COMMITTEE.

ANY INCOMPLETE SUBMITTAL WILL BE RETURNED AND/OR DENIED.

Architectural Application

		HANGE APPLICATION
		ON WILL DELAY THE REVIEW PROCESS.
HOMEOWNERS N	AIVIE	
PROPERTY ADDRE	ESS	
MAILING ADDRES	SS (IF DIFFERENT)	
PHONE (H)	(W)	EMAIL:
Nature of reques	st: (Check one or more of the following.)	
( )	Review/Approval of Yard Component Insta	llations or Changes
( )	Review/Approval of Interior Changes or Ins	stallations in Residential Unit or Garage
( )	Review/Approval of Changes or Installatior	ns on Porch or Balcony
( )	Review/Approval Satellite Receiver	
( )	Other	
DESCRIPTION		
		approval. All planned changes must be included in the description
section above as	well as on the drawings and illustrations submit	ted.
	REQUIRED TC	) READ AND SIGN
I reviewed t	he Design Guidelines and check list and I am subr	mitting a complete application with detailed plans.
THE LEGAL OWNE	ER MUST ADDRESS ANY QUESTIONS REGARDING	THIS APPLICATION. THIS APPLICATION REQUIRES THE SIGNATURE OF
THE HOMEOWNE	R. SIGNATURE ACKNOWLEDGES THAT IF ANY WO	DRK HAS COMMENCED PRIOR TO RECEIVING WRITTEN APPROVAL
FROM THE DRC, Y	OU WILL BE LIABLE FOR ALL COSTS NECESSARY T	O BRING THE WORK UP TO THE CURRENT STANDARDS. THE
HOMEOWNER UN	DERSTANDS THE ARCHITECTURAL REVIEW COM	MITTEE MAY NEED TO ENTER THE PROPERTY TO INSPECT WORK IN
PROGRESS AS WE	ELL AS COMPLETED WORK.	
I have read and u	inderstand that my contractor and I must compl	ly with the most current version of the Community Design
Guidelines and m	ust construct all improvements in accordance w	vith those guidelines and other governing documents of the
Association.		
Homeowner's Si	gnature:	Date:
	FOR ARCHITECTURAL	L COMMITTEE USE ONLY
Action taken by	Architectural Review Committee:	
( )	APPROVED (The request submitted is appro	oved.)
()	APPROVED AS NOTED (The request submit	
()	DISAPPROVED (The entire request is not ap	
Comments:		· · · · · · · · · · · · · · · · · · ·
Signature of ARC	Cmember:	
-	C member:	

This approval does not relieve the Owner from CC&R requirements nor does it constitute approval as to compliance with applicable State, County, or City Ordinances or requirements. Owner may also need to acquire building permits and/or approval from the City or County for permission to encroach within City or County easements. Approval is not to be considered authorization to change the drainage as installed by the developer and approved by the City or County.

Architectural Application

### **NEIGHBOR AWARENESS FORM**

OWNER'S NAME	
ADDRESS	
BUILDING	UNIT
ADDRESS	
PHONE NUMBER(S)	
noted below. (Check one).	<b>cifications for my neighbor's proposed improvements or installations. My comments are</b> proposed improvements/installations in regard to impact on my property. s regarding impact on my property.
Explanation:	
SIGNATURE	DATE
ADDRESS	
PHONE NUMBER(S)	
noted below. (Check one). I have no concerns about the	<b>cifications for my neighbor's proposed improvements or installations. My comments are</b> proposed improvements/installations in regard to impact on my property. s regarding impact on my property.
Explanation:	
SIGNATURE	DATE

This form is required only if requested improvements or installations impact adjacent neighbors.

#### **Indemnity Agreement**

*OWNER* (identified below) is the owner of property located within **TRIPOLY AT STEPHANIE** and wishes to commence construction of improvements (hereinafter the "improvements") set forth as attached hereto.

CONTRACTOR (identified below) has been hired by the Owner to effect the improvements.

*CONSTRUCTION* of the improvements is subject to the Declaration of Covenants, Conditions, Restrictions for **TRIPOLY AT STEPHANIE**, as well as certain Rules and Regulations, Design Guidelines and CC&R's.

THE ASSOCIATION and the DRC may (but are not obligated to) exercise supervisory responsibility with respect to ascertaining that Contractor's operation and improvements comply with Rules and Regulations, Design Guidelines and CC&R's.

CERTAIN INDEMNITIES are required of the Owner and Contractor, as follows, prior to commencement of construction of any improvements.

ACCORDINGLY, OWNER AND CONTRACTOR hereby agree to construct the improvements in accordance with the Rules and Regulations, Design Guidelines and Declaration of Covenants, Conditions and Restrictions of **TRIPOLY AT STEPHANIE**.

OWNER agrees to be held 100% responsible for any costs associated to damage occurred if owner chooses not use a licensed, insured and bonded contractor.

*OWNER* shall be responsible for the conduct of Contractors, its employees and agents within **TRIPOLY AT STEPHANIE**. Owner and Contractor understand and agree that violations of the Rules and Regulations may be met with a warning, stop work order, lien assessments and or revocation of Contractors right to enter Spring Mountain Ranch Master Association property.

OWNER AND CONTRACTOR hereby indemnify **TRIPOLY AT STEPHANIE** and the Design Review Committee, and agents thereof, and hold them harmless against and from any and all liabilities, claims, losses, damages and expenses connected with the improvements or construction of the improvements.

AGREED AND ACCEPTED this	day of	, 20
"OWNER"		"CONTRACTOR"
Name(s)	_	Name(s)
Street Address	_	Street Address
City/State/Zip	_	City/State/Zip
Phone Number(s)	_	Phone Number(s)
Signature	_	Signature
Date	_	Date

### SITE PLAN

(This form is supplied for your convenience. If formal plans or other plans are available feel free to supply those)

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