

PLEASE RETURN APPLICATION TO:

mgmt@hoa-bend.com, or to

2660 NE HWY 20 Suite 610 PMB 217, Bend, Oregon 97701

ELKAI WOODS HOMEOWNERS ARCHITECTURAL REVIEW COMMITTEE (ARC) APPLICATION FORM

A. Owner Contact Information

Owner(s): _____

Address: _____

Phone#: _____ Email: _____

B. Describe Proposed Exterior Project. (Include plans, photos, color samples, etc.)

C. Certification: By signing below, all Owners(s) and builder/contractor certify as follows:

1. I/We understand that any change(s) to the exterior of the home (including landscaping) specified in this form must be submitted to ARC for review and approval before any such change is made.
2. The Architectural Review Committee is not responsible for determining compliance with governmental regulations. It is the applicant's responsibility to verify easements, and property boundary lines.
3. I/We, the Owners, assume full responsibility for any and all damages by the Builder/Contractor, his agents and subcontractors, and their agents, to any adjacent properties, including other homeowner property, common areas and roadways.

Owner(s) Signature(s): _____

Date: _____

ARC RESPONSE (Management Use Only) Date Received: _____

____ Approved

____ Conditional Approval

____ Denied

ARC Comments: _____

ARC Representative Signature: _____ Date: _____