

LEISURE VILLAGE ASSOCIATION, INC.
ARCHITECTURAL PERMIT APPLICATION

PERMIT NUMBER

PRINT CLEARLY

Owner's Name _____ Village Address _____
Model Name _____ Telephone _____
Contractor's Name _____ Telephone _____
Address _____ License No. _____
Detailed Description of Project _____

CONDITIONS: By signing this Permit Application, owner(s) agrees to hold the Association harmless from all obligations, controversies, suits, or actions that may arise in connection with the work described in or done in connection with and pursuant to the permit. Owner accepts responsibility to maintain said improvements. Owner understands that the sprinkler system, trees and shrubs may not be altered or changed without further approval of the Association.

WORK MAY NOT COMMENCE ON THIS JOB UNTIL THIS PERMIT IS SIGNED BY THE ARCHITECTURAL COMMITTEE CHAIRPERSON. PERMIT EXPIRES IN 60 DAYS, UNLESS EXTENDED BY THE CHAIRPERSON. A COPY OF THIS PERMIT MUST BE DISPLAYED AT THE JOB SITE.

OWNER ACKNOWLEDGMENT: It is highly recommended the Owner obtain all required City of Camarillo Building Permits for work being done. A business doing work with a total value over \$1,000.00, (labor and materials), is required to be licensed with the State of California Contractor's License Board. Owner acknowledges receipt of the Architectural Guidelines.

SOLAR INSTALLATIONS: Homeowner understands and agrees that repair due to any damage that results to their property and/or adjoining property from the installation of solar panels and components is their sole responsibility. _____

I have read and understand the foregoing conditions fully and by signing this Application I agree to abide by all terms and conditions herein set forth.

Homeowner's Signature _____ Date _____

UPON COMPLETION OF THIS PROJECT PLEASE CALL THE LVA COMPLIANCE INSPECTOR AT 484-2861.

FOR COMMITTEE USE ONLY

Committee Consultant _____ Date _____

Guideline Page Number(s) _____

Waiver Required _____ Irrigation Required _____ On-Site Inspection _____

Approved to proceed: Date _____ By _____ Chairperson _____

Compliance Inspector: On-Site Inspection (if needed) _____ Date _____

Final Inspection _____ Date _____

Permit Denied _____

Distribution: White-LVA Office

Yellow – Committee

Pink: Homeowner/Contractor