



OFFICE USE ONLY	
Permit# _____	
Date Rec'd: _____	Staff Initials: _____
Existing: Y or N	Violation: Y or N
ACC Date: _____	Violation# _____

ARCHITECTURAL CONTROL COMMITTEE
CANYON LAKE PROPERTY OWNERS ASSOCIATION
REPAIR-REPLACEMENT-MAINTENANCE APPLICATION

TRACT _____ LOT _____ PHONE: _____

OWNER

CONTRACTOR

NAME:		NAME:	
SITE ADDRESS:		ADDRESS:	
MAILING ADDRESS:		BUSINESS LICENSE #	
PHONE/EMAIL:		PHONE/EMAIL:	

Please describe and numerically indicate improvement(s) below along with corresponding plot plan

Identify the type of improvement(s):

Repair Replacement Maintenance

1. _____

I have read and understand the Architectural Control Committee (ACC) procedures and requirements and the restrictive covenants for Canyon Lake and will comply with all provisions set forth therein.

I hereby grant permission to the Canyon Lake Property Owners Association, ACC Committee, and/or its agents to make periodic inspections during reasonable hours to ensure that construction is in accordance with approved plans.

I understand that per PC.1.5, Canyon Lake Property Owners Association's review and/or approval does not relieve owners of any duties to obtain city permits nor does Canyon Lake Property Owners Association's review and/or approval reflect compliance with any public agency requirements.

Approval of these plans shall not be construed to be a permit for or approval of any violation of any of the provisions of the rules and regulations and governing documents of the Canyon Lake Property Owners Association.

Signature of Property Owner

Date



**ARCHITECTURAL CONTROL COMMITTEE
CANYON LAKE PROPERTY OWNERS ASSOCIATION
REPAIR/REPLACEMENT/MAINTENANCE APPLICATION**

TRACT _____ LOT _____

**IMPROVEMENTS MUST BE COMPLETED NO LATER THAN 180 DAYS FROM DATE OF PERMIT
ISSUANCE PER PC.7.1 CC&R REQUIREMENTS**

Approved by Architectural Control Committee:

Condition of Approval:

Date: _____

Rejected by Architectural Control Committee:

Condition of Rejection:

Date: _____

Comments:

