BRIDLEVALE

HOME AND LANDSCAPE IMPROVEMENT APPLICATION

APPLICANT MUST FILL OUT SECTIONS 1 & 2 ONLY

CECTION 1 (Dlana Drive)	CECTION 2
SECTION 1 (Please Print)	SECTION 2
	NEIGHBOR NOTIFICATION
Homeowner: Date:	
Address: Lot #:	The intent of notification is to advise your neighbors
Telephone # - Day: Evening:	who own property adjacent to your lot (property) line
Original ApplicationModification to Original	of your request. This includes side yard neighbors and
8 · · · · · · · · · · · · · · · · · ·	rear yard neighbors. The Architectural Review committee
D. C. CI	(ARC) will convene to discuss proposed improvements.
Description of Improvement::	Disagreement of a neighbor does not necessarily mean your
	request will be denied.
	request will be deflied.
	THE CECTION MICT BE COMPLETED
	THIS SECTION MUST BE COMPLETED
	1. NamePhone#
	AddressLot#
Staring Date: Completion Date:	CommentsAgree/Disagree
	Signature Agree/Disagree
I have read and agree to the Architectural Guidelines	8 11, 118 1
and Rules and Regulations in the Design and Review	2. Name Phone#
Manual.	2. Name Phone# Address Lot#
Titilitati.	AddressLot#
Signature:	Comments
Signature.	SignatureAgree/Disagree
(ADCIDE ONLY)	
(ARC USE ONLY)	3. NamePhone#
	AddressLot#
SECTION 3	Comments
ARCHITECTURAL REVIEW COMMITTEE (ARC)	SignatureAgree/Disagree
THORITEGICIEM REVIEW COMMITTEE (THO)	
Approved as submitted	4. NamePhone#
	AddressLot#
Approved Subject to Condition(s) Outlined Below	
Denied for Reason(s) Listed Below	CommentsAgree/Disagree
Resubmission Necessary as Noted Below	Signaturengree/Disagree
	(A D C D IODECTION LIGH ONLY)
	(ARC INSPECTOR USE ONLY)
	SECTION 4
	FINAL INSPECTION
	Inspected By:
	Date:
	Date.
	Work-
Date ARC Member	
Date Member	IS NOT
3.6.12 PS	in compliance with approved plan. The following
Mail To:	discrepancies were noted:
The Avalon Management Group, Inc.	
43529 Ridge Park Drive	
<u>e</u>	
Temecula, CA 92590	Re-inspected By:
	Date:

Bridlevale Homeowner's Association

ARCHITECTURAL PROJECT NOTICE OF COMPLETION

Name(s) of Owner:			
Print Name			
Print Name			
Telephone Number:			
Type of Improvement Complete	d:		_
Project Address:			_
I or We the owner(s) of the altompleted in accordance with tincorporated.			
Signature of Owner	Da	te	
Signature of Owner	Da	te	
	For Committee Use		
Date of Final Inspection:			
Property is in:	Compliance	Non-Compliance	
Reason(s):			
			_
			_
Architectural Control Committee	e Signatures:		
Member:Print Name	 Signature	Date	_
	G	Date	
Member:Print Name	Signature	Date	_
Member:			
Print Name	Signature	Date	