

TUSTIN MEADOWS COMMUNITY ASSOCIATION
HOME IMPROVEMENT FORM

Please complete this request form and attach one (1)* complete copy of your proposed improvement plans. **Incomplete applications will not be considered and will be returned.** To assure prompt consideration, review all submittal materials for completeness before submission.

Mail or deliver to:

Tustin Meadows Community Association
c/o Action Property Management
2603 Main Street, Suite 500
Irvine, CA 92614
maoc@actionlife.com · 949-450-0202

Homeowner Name: _____

Property Address: _____

Email address: _____ Phone number: _____

Approximate Start Date: _____ Finish Date: _____

PROJECTS BEING SUBMITTED: (Please check appropriate boxes)

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> AIR CONDITIONER | <input type="checkbox"/> GAZEBO | <input type="checkbox"/> SPA AND EQUIPMENT |
| <input type="checkbox"/> ARTIFICIAL TURF | <input type="checkbox"/> GREEN HOUSE | <input type="checkbox"/> POOL AND EQUIPMENT |
| <input type="checkbox"/> ANTENNA | <input type="checkbox"/> GUTTERS | <input type="checkbox"/> TREES |
| <input type="checkbox"/> AWNINGS | <input type="checkbox"/> LANDSCAPING | <input type="checkbox"/> WALLS |
| <input type="checkbox"/> DECK | <input type="checkbox"/> SIDE | <input type="checkbox"/> SIDE |
| <input type="checkbox"/> DRAINS (If altering existing grade) | <input type="checkbox"/> FRONT | <input type="checkbox"/> FRONT |
| <input type="checkbox"/> EXTENSION | <input type="checkbox"/> REAR | <input type="checkbox"/> REAR |
| <input type="checkbox"/> EXTERIOR PAINT: Scheme # _____ | <input type="checkbox"/> PATIO COVER | <input type="checkbox"/> RETAINING |
| <input type="checkbox"/> FENCE(S) | <input type="checkbox"/> ROOF | <input type="checkbox"/> POD OR DUMPSTER |
| <input type="checkbox"/> GARAGE DOOR | <input type="checkbox"/> SHED | |
| <input type="checkbox"/> OTHER: _____ | | |

Please ensure that the following details are shown on your plans and the following documents attached:

- | | |
|---|--|
| <input type="checkbox"/> NAMES OF PLANTS | <input type="checkbox"/> ONE (1)* SET OF PLANS OR DRAWINGS |
| <input type="checkbox"/> TYPE OF MATERIALS USED | <input type="checkbox"/> TYPE OF WOOD SURFACES |
| <input type="checkbox"/> COLOR SCHEME FOR PAINT | |

I UNDERSTAND AND AGREE THAT:

1. No work on this request shall commence until written approval of the Architectural Committee has been received.
2. The "General Conditions of Approval" section of the Rules and Regulations shall apply to any approval.
3. I understand work must be completed within ninety (90) days of receiving approval.

Homeowner Signature: _____ Date: _____

** Room Addition and Pool projects, please submit three (3) copies of plans*