

Meadow View Park Change Request Form (CRF)

Instructions: Please submit two copies of this completed form to any member of the Architectural Control Committee (ACC) for review at least one week prior to monthly ACC meeting and at least two weeks before needing approval. Meeting dates are posted on the Meadowview Park Website at <http://www.meadowviewpark.org/index.html>. Rules for property changes are detailed in the MVP CC &Rs which are also posted on the MVP HOA Website.

Procedure: The ACC meets monthly or as needed to review any submitted Change Request Forms. Upon receipt, the ACC will determine the completeness of the application and make a determination as to its recommendation to the Board for approval or disapproval, or any recommended changes to the CRF. CRFs will then be reviewed by the Board at their next regularly scheduled meeting, or as called for that purpose, and Approved or Disapproved. (This process can be expedited if necessary and if circumstances allow.)

It is the responsibility of the homeowner to allow adequate time for the ACC and Board to make a determination for each CRF. Incomplete CRFs will be returned to the homeowner and will not be considered until complete. Any work performed that deviates from an approved CRF or any work that begins before obtaining Board approval in writing on a submitted CRF is subject to Board action as outlined in the MVP CC & Rs and Bylaws.

Date Received by ACC: _____	ACC Member Name: _____
Date Recommended/Rejected by ACC: _____	Recommended: _____ Rejected: _____
Date received by Board: _____	
Board Determination: Date: _____	Approved (signature): _____
Disapproved (signature): _____	
Date returned to Home Owner: _____	

Part 1: Homeowner/Project Information

Homeowner's Information:

Name(s): _____

Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Project Information:

Please summarize the scope of the project. Include information about the materials to be used, location and dimensions of the project, paint colors, etc. Please attach drawings, brochures and plans that may be helpful and samples of paint color selection. Consult CC&Rs for further information and guidelines.

Attach additional pages as needed

Affected Neighbors:

Please discuss your project with any neighbors who may be affected by your project. Please have them print their name, address, phone number and initial in the space provided. Neighbors are welcome to comment in the space provided.

Neighbor #1:

Name: _____

Address: _____

Phone number: _____

I am aware of this project and give / do not give (circle one) my support.

Initials: _____

Comments:

Neighbor #2:

Name: _____

Address: _____

Phone number: _____

I am aware of this project and give / do not give (circle one) my support.

Initials: _____

Comments:

Neighbor #3:

Name: _____

Address: _____

Phone number: _____

I am aware of this project and give / do not give (circle one) my support.

Initials: _____

Comments:

Neighbor #4:

Name: _____

Address: _____

Phone number: _____

I am aware of this project and give / do not give (circle one) my support:

Initials: _____

Comments:

Neighbor #5:

Name: _____

Address: _____

Phone number: _____

I am aware of this project and give / do not give (circle one) my support.

Initials: _____

Comments:

Homeowner's Signature: _____

Date: _____

Part 2: MVP ACC and Board to Complete

Instructions:

(ACC): Review CRF for completeness and conformity to established CC&Rs and ACC guidelines. Complete box below with comments and recommendation. Forward to MVP Board with in two business days.

(MVP Board): Make Final Determination and return one copy to the homeowner and the second copy to the MVP Board Vice President.

ACC Review: _____ Date: _____

Comments:

ACC Recommendation to Board:(circle one): Approve Reject

Signature: _____

HOA Board Final Determination

Project is (circle one): Approved Denied

Date: _____

Completed by: _____ Signature _____

Completed by: _____ Signature: _____

Form returned to homeowner (circle one): Via Mail In Person Date: _____

Additional copy retained by MVP Board Vice President.

COMMENTS: