

**ANACAPA WALK CORPORATION**  
**ARCHITECTURAL APPROVAL APPLICATION**

Owner Name *(please print)* \_\_\_\_\_ Date \_\_\_\_\_

Property Address \_\_\_\_\_ Port Hueneme, CA 93041

Mailing Address *(if different)* \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Proposed Improvements (please include a drawing or additional pages if appropriate): \_\_\_\_\_

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*The Board has up to 45 days to consider this request. Please allow for this time.*

**NEIGHBOR ADVISEMENT:**

The Architectural Committee has determined that it is in your best interest to advise your neighbors of any proposed improvements to your property. *Objections by neighbors do not mean disapproval by committee. Objections will be reviewed by the committee.*

**SUBMITTAL:**

Please review CC&R's (Article VII, p. 86-92) for additional requirements. Please include brochures, color chips, etc., if appropriate.

1. Description of improvement
2. Location of improvement and residence on plot plan with dimensions to property lines
3. Materials to be used and colors of materials
4. All dimensions of improvements
5. Elevations of proposed improvements relating to existing dwelling

*If any of the above information is not included, your plans will be returned to you without processing.*

**Email To:** [info@anchorcommunitymgmt.com](mailto:info@anchorcommunitymgmt.com)

**Or Fax To:** (805) 388-0856

**Or Mail To:**

**Anacapa Walk Corporation**  
**c/o Anchor Community Management, Inc.**  
**P. O. Box 3237, Camarillo, CA 93011-3237**

**ARCHITECTURAL APPROVAL REQUEST**

**I understand and agree that:**

1. This application for architectural review will be submitted to Anchor Community Management no later than forty-five (45) days prior to the anticipated commencement of work.
2. No work on this request shall commence until written approval of the Architectural Control Committee has been received.
3. I acknowledge that if this request is approved, the work will be done expeditiously and in a good and workmanlike manner. I also acknowledge that any work governed by local building ordinances will be done under permit and by a licensed contractor. I am aware that the common areas must be cleaned daily. Materials must be stored in the unit's backyard or other area not visible from the common area during construction.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

*The following section is for the architectural committee only:*

<b><u>ARCHITECTURAL CONTROL REVIEW</u></b>		
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	<input type="checkbox"/> Conditional Approval
Reason for disapproval, or conditions of approval ( <i>required</i> ):		
_____		
_____		
_____		
_____		
By _____		Review Date _____