VILLA RIVIERA HOMEOWNER ASSOCIATION

REQUEST TO REPLACE/CHANGE/ADD WINDOWS AND/OR SLIDING GLASS DOORS

HOMEO	WNERS(s):	an	d/or	
1855 E Ramon Rd Apt Palm Springs, CA 92264				
Mailing Address (if different):				
Email 1 _		Email 2 _		
Tel 1: (_)	Tel 2: ()	
PROPOS	SED CHANGE:			
Requirer	nents:			
2. / 3. 1 4. / 5. 1 6. N 7. 1 8. / 9. 1	windows. Any damage to exterior walls/stucc o match the current Villa Riviera ex f you own one of 7 interior units tha	ninum. Dening. of glass – no mullions. wever, mirror finishes are are allowed between the ng window like the origin o must be repaired to the kterior colors. at does not have direct a		
Attached with this request is set(s) of plans and/or a copy of the proposal from a licensed construction/window contractor.				
	ntractor's contact information and 0 clude the information here:	California State Contracto	or's License Number isn't included on the proposal	
Company Name:			License Number:	
Contact I	Name:			
Address:				
Telephone/email contacts:				

I/We understand that building permits for home improvements are required by the City of Palm Springs, and the cost of the permits, the responsibility for obtaining the permits and subsequent inspections will be borne by the applicant/homeowner.

I/We acknowledge that all approved window replacements/changes will be at our expense.

I/We acknowledge that any damage to the common area (including, but not limited to sidewalks, pathways, sprinklers, walls, irrigation, electrical, fixtures, landscaping, gates, gate mechanisms and blacktop) for the duration of this project, whether caused by the contractor, subcontractor(s), homeowner(s) or laborers, will be the responsibility of the applicant/homeowner(s).

I/We acknowledge that we must abide by the City of Palm Springs construction work hours.

I/We acknowledge that all construction debris, including the old windows, may not be disposed of in the common trash bins. All debris must be removed from the site and properly disposed of by the contractor or homeowner.

The work will require _____ days from start to completion.

I/We understand and agree that it is the applicant's responsibility to advise any subsequent owner of the modifications and any subsequent maintenance responsibility.

Signature(s) of all owners:	Date:			
Print Name	_			
	Date:			
Print Name				
The above request has been reviewed by the Architectural Committee	on and has been:			
APPROVED () REJECTED () PENDING FURTHER				
COMMENTS:				
Approved by: Print Name: (Architectural Comm. Chairman)				
Date: (Permit Expires):				
Completed work inspected by: Print Name: (Architectural Committee)				
Date:				
Scan/email, mail or fax form to: Jackie Smith, Manager Villa Riviera The Gaffney Group, Inc. 1111 E. Tahquitz Canyon Way, Ste. 107 Palm Springs, CA 92262 Fax: (877) 681-0301; Office: (760) 327-0301; <u>Jackie@TheGaffneyGr</u>	<u>roup.net</u>			