





Cambridge Homeowners Association

Architectural Request Form

OWNER: _____ DAY PHONE: _____

PROPERTY ADDRESS: _____

MAILING ADDRESS (if different): _____

THIS APPLICATION IS FOR REVIEW AND APPROVAL OF THE FOLLOWING DESCRIBED IMPROVEMENTS. ANYTHING NOT LISTED HERE AND NOT CLEARLY SHOWN ON PLANS WILL NOT BE A PART OF THIS REVIEW. APPROVAL IS FOR ASSOCIATION PURPOSES ONLY AND DOES NOT CONSTITUTE APPROVAL AS TO COMPLIANCE WITH APPLICABLE STATE, COUNTY OR CITY LAWS, BUILDING AND SAFETY REQUIREMENTS OR ZONING ORDINANCES.

NATURE OF PROJECT: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED (check all that apply)

- Addition to existing dwelling (room addition or patio enclosure)
- Concrete work, paving stones, (walkways, patio surface, deck, etc.)
- Landscape changes and additions
- Landscape plans – New Installation
- Painting of exterior of dwelling (trim, fencing, property walls, etc.)
- Patio Cover
- Pool, spa, water feature
- Property walls – New Installation or Changes to Existing Walls
- Wrought Iron Fencing and/or Gates
- Other

A COMPLETE COPY OF FINAL PLANS MUST BE ATTACHED SHOWING:

- Site Plan and Floor Plan, if possible
- Exterior Elevations
- Roof Design
- Exterior Materials and Finishes
- Landscaping & Irrigation Plan
- Such Other Items Necessary To Reflect The Character And Dimensions Of The Improvements

Submit to:
Cambridge Homeowners Association
C/o FirstService Residential
2760 W. Deer Springs Way Suite 104
North Las Vegas, NV. 89084



FirstService
RESIDENTIAL

Deer Springs Office
nevada.fsrconnect.com/cambridge

■ 2760 W. Deer Springs Way, Ste. 104 | North Las Vegas, NV | 89084
phone: 702.932.6714 fax: 702.737.3360



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****THE LEGAL OWNER MUST ADDRESS ANY QUESTIONS REGARDING THIS APPLICATION. THIS APPLICATION REQUIRES THE SIGNATURE OF THE HOMEOWNER. SIGNATURE ACKNOWLEDGES THAT, IF ANY WORK HAS BEEN COMMENCED PRIOR TO RECEIVING WRITTEN APPROVAL FROM THE ARC, YOU WILL BE LIABLE FOR ALL COSTS NECESSARY TO BRING THE WORK UP TO THE CURRENT STANDARDS. THE HOMEOWNER UNDERSTANDS THAT THE ARC MAY NEED TO ENTER THE PROPERTY TO INSPECT WORK, IN PROGRESS, AS WELL AS COMPLETED WORK. ****

I have read and understand that my contractor and I must comply with the most current version of the Cambridge Architectural Review Guidelines and must construct all improvements in accordance with those guidelines and other governing documents of the Association.

Owner's Signature: _____ Date: _____

ACTION TAKEN BY ARC:

_____ APPROVED AS SUBMITTED

_____ APPROVED WITH CONDITIONS (see attached memorandum for further details)

_____ DISAPPROVED (project must be corrected and resubmitted)

FOR THE ARCHITECTURAL REVIEW COMMITTEE: _____ DATE _____





Cambridge Homeowners Association

Architectural Request Form

NEIGHBOR AWARENESS FORM

OWNER'S NAME: _____

ADDRESS: _____

NEIGHBOR'S NAME: _____

ADDRESS: _____

PHONE NUMBER(S): _____

I have reviewed the plans and specifications for my neighbor's proposed improvements. My comments are noted below: (check one)

- I have no concerns about the proposed improvements in regard to the impact on my property.
- I have the following concerns about the proposed improvements in regard to the impact on my property:

SIGNATURE: _____ DATE: _____

NEIGHBOR'S NAME: _____

ADDRESS: _____

PHONE NUMBER(S): _____

I have reviewed the plans and specifications for my neighbor's proposed improvements. My comments are noted below: (check one)

- I have no concerns about the proposed improvements in regard to the impact on my property.
- I have the following concerns about the proposed improvements in regard to the impact on my property:





Cambridge Homeowners Association

Architectural Request Form

SIGNATURE: _____ DATE: _____

NEIGHBOR'S NAME: _____

ADDRESS: _____

PHONE NUMBER(S): _____

I have reviewed the plans and specifications for my neighbor's proposed improvements. My comments are noted below: (check one)

- I have no concerns about the proposed improvements in regard to the impact on my property.
- I have the following concerns about the proposed improvements in regard to the impact on my property:

SIGNATURE: _____ DATE: _____



EXHIBIT C
PROVIDENCE MASTER HOMEOWNERS ASSOCIATION
DESIGN REVIEW APPLICATION

OWNER _____ FEE _____

PROPERTY ADDRESS: _____ COMMUNITY _____

MAIL ADDRESS (If different) _____

DAYTIME PHONE _____ EMAIL _____

THIS APPLICATION IS FOR REVIEW AND APPROVAL OF THE FOLLOWING DESCRIBED IMPROVEMENTS. ANYTHING NOT LISTED HERE AND NOT CLEARLY SHOWN ON PLANS WILL NOT BE A PART OF THIS REVIEW. APPROVAL IS FOR ASSOCIATION PURPOSES ONLY AND DOES NOT CONSTITUTE APPROVAL AS TO COMPLIANCE WITH APPLICABLE STATE, COUNTY OR CITY LAW, BUILDING AND SAFETY REQUIREMENTS OR ZONING ORDINANCES.

NATURE OF PROJECT: (CHECK ALL THAT APPLY)

- Painting of exterior of Dwelling (trim, fencing, property walls, etc.) – not original color scheme
- Landscape changes and additions
- Landscape plans – New Installation
- Patio cover
- Wrought iron fencing and/or gates
- Concrete work/paving stones (walkways, patio surface, deck etc.)
- Property walls – new installation or changes to existing
- Solar Panels
- Pool, spa, water feature (\$35)
- Addition to existing Dwelling (room addition or patio enclosure) (\$35)
- Other _____

FOR OFFICE USE ONLY:
ACCT #: _____
TYPE: _____
NOTES: _____

**A COMPLETE COPY OF FINAL PLANS MUST BE ATTACHED, SHOWING:
(INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED)**

- ✓ Site Plan And Floor Plan If Applicable
- ✓ Exterior Elevations
- ✓ Roof Design (Solar Plans)
- ✓ Exterior Materials Specifications And Finishes/Colors
- ✓ Landscaping & Irrigation Plan
- ✓ Such Other Items Necessary To Reflect The Character And Dimensions Of The Improvements
- ✓ Defined Set-Back Measurements (distance from object to perimeter walls)

****THE LEGAL OWNER MUST ADDRESS ANY QUESTIONS REGARDING THIS APPLICATION. BY ENTERING YOUR NAME, YOU ELECTRONICALLY APPROVE THIS APPLICATION; APPROVAL MUST BE RECEIVED BY THE HOMEOWNER. SIGNATURE OR ELECTRONIC ACKNOWLEDGMENT CONFIRMS THAT IF ANY WORK HAS COMMENCED PRIOR TO RECEIVING WRITTEN APPROVAL FROM THE DRC, YOU WILL BE LIABLE FOR ALL COSTS NECESSARY TO BRING THE WORK UP TO THE CURRENT STANDARDS. THE HOMEOWNER UNDERSTANDS THE DRC MAY NEED TO ENTER THE PROPERTY TO INSPECT WORK IN PROGRESS AS WELL AS COMPLETED WORK.**

I have read and understand that my contractor and I must comply with the most current version of the Community Design Guidelines and must construct all improvements in accordance with those guidelines and other governing documents of the Association.

EMAIL: CHECK HERE to request ALL written communications regarding this Application to be delivered only to the email address above. (If unchecked, all written communication regarding this Application will be mailed to the mailing address on file. This email directive does not extend to other Association communications such as billings, etc.; this option applies ONLY to this DRC Application.)

Owner Acknowledgment _____ **Date:** _____



PROVIDENCE

Master Homeowners Association

Notice of Completion DRC APPROVAL

Homeowner Name: _____

Property Address: _____

Daytime Telephone Number: _____

Email address: _____

Improvement Description: _____

By signing or entering your name on this form the Homeowner certifies that the project has been installed as approved by the DRC.

Signature of Homeowner

Date

RETURN COMPLETED, SIGNED FORM TO:
Email: compliance@providencelvhoa.com
Fax: 702-240-3048
Office: 7181 N. Hualapai Way Suite 150

The Providence Master Homeowners Association may contact you to request an inspection of completed modification.

For Office Use Only

Inspection requested: Yes No

Date Inspected _____

Completion Verified: Yes No

Name of Inspector _____