

Application for Re-Painting Different Color

Resolution 17-02 Establishing Timeline to update re-painting of houses
CC&R's Article 5, Maintenance and repair, Section 5.3

OWNER'S NAME: _____ DATE: _____

PROPERTY ADDRESS: _____ DAY TIME PHONE: _____

MAILING ADDRESS _____ CITY: _____ STATE: _____

E-MAIL: _____

PROJECTS BEING SUBMITTED: (Please check all that apply and add color scheme):

_____ Original Color Scheme _____

_____ New Color Scheme: Change Color Group to _____

Monotony Clause: A new color group cannot cause a repetitive or similarity within an immediate area adjacent to or surrounding the unit to be painted. If determined to violate this monotony clause, the unit is subject to be repainted at the expense of the owners. Initials _____

Please initial each paragraph below:

_____ Owners remain permanently responsible for the maintenance and upkeep of modifications to their property.

_____ Any and all debris associated with this improvement must be kept off the streets in front of the home.

_____ Common area property may not be used as construction access to homeowner property.

_____ This approval does not relieve the owner from any requirements of the declaration or design guidelines nor does it constitute approval as to compliance with applicable Nevada Law or local building codes.

This application requires the signature of the owner of the unit and/or agent of the owner. The undersigned acknowledges that if any work has commenced prior that does not conform to the Declaration or Design Guidelines, the owner will be liable for all costs necessary to bring the work into conformance with the Governing documents..

I _____, have read and understand that I must comply with the most current version of the Design Guidelines for Sun City Mesquite.

Submitted by: _____
Homeowner

Color Scheme: Neighbor on Left # _____ Neighbor on Right # _____ Neighbor Across Street # _____ &/or # _____

Estimated Date of Completion _____

Note: A \$25 processing fee is due at the time the Application is submitted. Please attach invoice from Vendor

Accepted: Date _____ by Staff or ARC _____

Completion: Inspected Date _____ Initial _____ Name: _____