

WINHAVEN GARDENS HOMEOWNER ASSOCIATION
P.O. Box 1566 Minden, NV 89423
APPLICATION FOR ARCHITECTURAL MODIFICATION

PLEASE ALLOW 30 DAYS FOR APPROVAL AFTER RECEIPT BY ACC
DO NOT START MODIFICATION WITHOUT WRITTEN APPROVAL

Name: _____

Address: _____ Telephone: _____

Please describe below the proposed modifications, attaching extra sheets as necessary. If appropriate include detailed plans, color selection, etc. You may wish to review the Architectural Control Guidelines prior to submission.

I hereby acknowledge that I will maintain the proposed modifications in a condition, which is in accordance with this proposal, and that I will reimburse the Homeowner Association for any and all expenses it incurs as a result of this proposed modification.

Signature: _____ Date: _____

NOTICE TO HOMEOWNER: Reference is hereby made to Section 11.6 of the Declaration of Covenants, Conditions and Restrictions of Winhaven Gardens recorded September 28, 1990, as amended, for limitations as to liability of Winhaven Gardens Homeowners' Association for work performed under the terms of this application and any approval of this application. Any approval of this application is in addition to, and is not a substitute for, any or all applications and permits required by the Town of Minden or Douglas County that may be required before, during and after construction.

FOR ARCHITECTURAL CONTROL COMMITTEE (ACC) USE ONLY

Date Received: _____ Received By: _____

Approved & Conditions of approval: { } Disapproved & reasons for disapproval: { } _____

By: _____ Date: _____

By: _____ Date: _____

By: _____ Date: _____

Applicant advised of disposition by: _____ Date: _____

Note: The project described and approved above, must be completed within _____ calendar days of the Applicant's notification of approval. Any delays beyond this date will require resubmission of your request for reevaluation and approval/disapproval by the Architectural Control Committee.