

**LAGUNA SPRINGS TWO MAINTENANCE ASSOCIATION
ARCHITECTURAL CONTROL BOARD**

You may email completed application and requirements to **admin@tgms.com**
Please allow 14-30 business days for response, NO WORK IS TO COMMENCE PRIOR TO APPROVAL

APPLICATION FORM

Name: _____

Address: _____

Date: _____ Phone #'s: _____

Email(s): _____

Approval is hereby requested to make the following modification, alteration, or addition to my home or lot. In making this request, I hereby agree to repair any damages caused to common or limited common areas as a result of this work and will restore these areas to their original condition within two weeks of completion: _____

COMPANY NAME & ADDRESS: _____

COMPANY LICENSE NUMBER: _____

The following documents are required for reviewing your Architectural Modification form:

1. A copy of your lot survey with the location of the proposed modifications drew to scale and indicating all setbacks from the property lines for requests that include but are not limited to driveway, fence, pool, exterior structures, or landscaping additions to property.
2. Copy of contractor's license and contact information.
3. A copy of a proposal, including specifications from the contractor scheduled to do the work
4. A Certificate of Insurance from your contractor for Worker's Compensation, Automobile Liability and General Liability, listing your name and address as the correct owner of the property as the **Certificate Holder** PLUS including as **Additional Insured:** "Laguna Springs Two Maintenance HOA AND your address."

***If you are doing the work yourself, include a sketch drawing of the modification. ***

***If roof work: include a sample, brochure, or photo of the tile.**

HOMEOWNERS SIGNATURE: _____

Application must be signed

Date first received Application incomplete, contacted owner: Yes ___ No ___
Date received: _____
Approved _____ PM _____ Bd Mbr _____ ACB _____
Denied _____ PM _____ Bd Mbr _____ ACB _____
Comments: _____
