

## Lake Shastina Property Owners Association

16320 Everhart Drive – Weed, CA 96094

Phone: (530) 471 - 2020

Fax: (503) 938-4739

## **Paint/Siding Application**

Date:	Application No.:		
APN:			
Name:			
Mailing Address:			
Project Address:			
(If different than mailing address)			
Cell Phone:			
Email Address:			
(We) authorize the LSPOA to send all correspondence r			
Contractor Name:			
Contractor Business:			
Cell Phone:	Alternate Phone:		
Required Information to be submitt  Exterior Colors	ed with Application:		
Deposits and Fees:			
	\$100.00 – Plan Compliance & Clean Up Deposit		
\$20.00 \$20.00 – Processing	\$20.00 – Processing Inspection Fee.		
\$120.00 TOTAL FEES AND DE	POSITS		
MPORTANT NOTICES			
*Note: All Deposits are interdepen	dent and will be held until project n	neets final plan compliance.	
*Note: Re-Inspection Fees vary fro	m \$10.00 – \$50.00 depending upon	subject.	
*Note: A \$35.00 Project Extension	Fee will be applied after 1 year for $\epsilon$	each additional 6 months.	
*Note: All Fees and Deposits are su	ubject to change by LSPOA Board of	Directors	
Preliminary Checklist for LSPOA App Before Submitting your LSPOA Application for Impr		mum requirements are met:	
Paint:			
☐ Attach product information ma	☐ Attach product information material and color name for body, trim, accent, etc.		
·	be used, body, trim, accent, door, etc.		
indicate where each color will	se used, souy, trim, deceme, door, etc.		
ANY CHANGES TO ORIO	GINAL APPROVED PACKET MUST AL	SO BE	
·	APPROVAL BEFORE CONSTRUCTION		
Owner's Signature:	<u>-</u>	Date:	
f contractor is acting as owner's agent and in beha	alf of owner, please sign below. Notices to	be sent to owner.	
Contractor's Signature:		Date:	