

# EVO HOMEOWNERS ASSOCIATION

## NOTICE OF COMPLETION FORM

This form must be completed and submitted to the Evo Homeowners Association upon completion of an Owner's improvements to the Unit. Upon APPROVAL of the completed work, any remaining balance from the application fee/deposit will be refunded to you, as applicable.

Today's Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Unit #: \_\_\_\_\_

Address Where Work Took Place: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_\_

Evening Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Notice is hereby given that the undersigned is the Owner of the property where the work took place and that the work was completed on the date specified below:

Date Work Was Completed: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Applicant's Name: \_\_\_\_\_  
*(Please Print)*

Applicant's Signature: \_\_\_\_\_

Please provide the following documents in order that the Notice of Completion may be reviewed.

- Photographs of everything completed on the property.
- Copy of approved stamped plans *(and any approved revised/amended plans)*.

*(Do Not Write Below Line. This is to be completed by Architectural Committee Only)*

.....  
Committee Comments:

Submittal

SUBMITTAL APPROVED

Submittal

NOT APPROVED

- |                          |                          |                          |                                     |
|--------------------------|--------------------------|--------------------------|-------------------------------------|
| 1 <sup>st</sup>          | 2 <sup>nd</sup>          | 3 <sup>rd</sup>          |                                     |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Incomplete Submittal                |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Require Additional Information      |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Appearance Evaluation Review        |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Checklist                           |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Completion of Home Improvement Form |

Submittal

APPROVED WITH CONDITIONS

- |                          |                          |                          |                              |
|--------------------------|--------------------------|--------------------------|------------------------------|
| 1 <sup>st</sup>          | 2 <sup>nd</sup>          | 3 <sup>rd</sup>          |                              |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Community CC&R's             |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Notes on Plans               |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Appearance Evaluation Review |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plan Check Review Letter     |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Other _____                  |

Architectural Review Committee's Signature:

Signature (1<sup>st</sup> Submittal)

Date

Signature (2<sup>nd</sup> Submittal)

Date

Signature (3<sup>rd</sup> Submittal)

Date