THE REDWOODS HOMEOWNERS ASSOCIATION ARCHITECTURAL APPROVAL AND REVIEW FORM

Owner's Name	i.	Phone Number:	
Property Addre	ess:	Email:	a family and the
Type of Improv	vement:		
	provement:		
	improvement: Give as much detail as p		ns, material, etc.)
	Irawings, plans, photos, brochures, if p		,
Jakan			
			
	ame:Co		ALL DE CONTRACTOR DE CONTRACTO
	sured?[]YES[]NO		
Please attach a	copy of the contractor's proof of insur	rance. (REQUIRED)	
Date submitted	- Augustinistical production of the state of		
Send to:	The Redwoods HOA		
	Attention: Team Property Manageme	ent	
	1588 North Batavia Street, Suite #2		
	Orange, CA 92867		
	Email: kathy@thehoateam.com		
	714-639-8585 (Fax)		
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	ARCHITECTURA	L COMMITTEE	
The above arch	itectural modification has been review	red and has been	
		APPROVED	DENIED
Conditions of A	pproval/Reasons for Denial:		
CONTRICTIONS OF A	pproval/ricasons for Demai.		-
Date;	Signature:		
	Board	d of Directors / Architectural Comi	mittee Member