LEISURE VILLAGE ASSOCIATION, INC.
ARCHITECTURAL PERMIT APPLICATION

PERMIT NUMBER

PRINT CLEARLY

Owner's Name_____ Village Address _____

Model Name_____ Telephone _____

Contractor's Name_____Telephone _____

Address_____License No. _____

Detailed Description of Project_____

_____

_____

_____

CONDITIONS: By signing this Permit Application, Owner(s) agree to release and hold Association and its officers, directors, employees and agents harmless from any and all claims, demands, costs, expenses, rights, and causes of action of any kind that may arise as a result of the installation, removal, maintenance, repair and/or replacement of the work described above and its use. Owner(s) further agree to indemnify and defend Association and its officers, directors, employees and agents against any claim, lien, judgement, costs, expenses, or causes of action arising from the work described above and any other work performed or out of my conduct as owner, as well as the consultants, contractors, agents, or any others acting under my direction or control. Owner is solely responsible for any damage to his/her property, neighboring properties or Common Areas, or any personal injury in connection with, arising out of or related to the work described herein. Owner understands that the sprinkler system, trees, and shrubs may not be altered or changed without further approval of the Association.

WORK MAY NOT COMMENCE ON THIS JOB UNTIL THIS PERMIT IS SIGNED BY THE ARCHITECTURAL COMMITTEE CHAIRPERSON. PERMIT EXPIRES IN 60 DAYS, UNLESS EXTENDED BY THE CHAIRPERSON. A COPY OF THIS PERMIT MUST BE DISPLAYED AT THE JOB SITE.

OWNER ACKNOWLEDGMENT: It is highly recommended the Owner obtains all required City of Camarillo Building Permits for work being done. A business doing work with a total value over $1,000.00, (labor and materials), is required to be licensed with the State of California Contractor's License Board. Owner acknowledges receipt of the Architectural Guidelines.

SOLAR INSTALLATIONS: Homeowner understands and agrees that repair due to any damage that results to their property and/or adjoining property from the installation of solar panels and components is their sole responsibility. _____

I have read and understand the foregoing conditions fully and by signing this Application I agree to abide by all terms and conditions herein set forth.

Homeowner's Signature_____Date_____

UPON COMPLETION OF THIS PROJECT PLEASE CALL THE LVA COMPLIANCE INSPECTOR AT 805 484-2861.

FOR COMMITTEE USE ONLY

Committee Consultant_____Date _____

Guideline Page Number(s) _____

Irrigation Required_____ On-Site Inspection_____

Approved to proceed: Date_____By_____ Chairperson

Compliance Inspector: On-Site Inspection (if needed) _____ Date _____

Final Inspection_____ Date_____

Permit Denied _____

_____

Distribution: White-LVA Office Yellow – Committee Pink: Homeowner/Contractor (REV 07/13/2026)