

**POINTE SURFSIDE HOMEOWNER ASSOCIATION  
REQUEST FOR ARCHITECTURAL IMPROVEMENT**

**Date Submitted:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Please describe your improvement in the space provided below. If possible, please provide actual samples of pictures (paint tabs, brochure) of improvement proposed.**

---

---

---

---

---

---

---

---

---

---

**Please send the completed application with one set of complete plans showing all specifications, materials and locations to the attention of Jan Standish, Account Executive at the following address:**

**Pointe Surfside Homeowners Association  
C/O Golden West Property Management  
6101 Ball Road, Suite 301  
Cypress, CA 90630  
Phone-714-220-5920  
Fax- 714-220-9327**

**Please note that no deviation from the submitted plans is permitted.**