



ARCHITECTURAL REVIEW  
**APPLICATION**  
TAMARACK SPRINGS, CA

DATE: \_\_\_\_\_

**SUBMIT TO:**  
**ARCHITECTURAL REVIEW BOARD**  
**145 MOKELUMNE RIVER DRIVE**  
**LODI, CA 95240**

WWW.TAMARACKSPRINGS.ORG

**1. Applicant Request**

- Site and Design
- Plan Amendment
- Home Improvement
- Other Variance
- Architectural Review
- Water Service Connection
- Protected Tree Removal

**2. Property Location**

Address of Subject Property: \_\_\_\_\_

**3. Requested Action**

Description of requested action: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Applicant**

**NOTE: APPLICANT & PROPERTY OWNER** must be placed on the submitted mailing list in order to be notified of Meetings, Hearings or action taken.

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

**5. Property Owner**

**NOTE: APPLICANT & PROPERTY OWNER** must be placed on the submitted mailing list in order to be notified of Meetings, Hearings or action taken.

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

I hereby certify that I am the owner of record of the property described in Box #2 above and that I approve of the requested action herein.

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

**6. Actions Taken**

Architectural Review Board

Date	Decision

**7. Your Next Step**

- Apply to the Building Inspection Division (or other originating Department) for your Permit.
- Findings and Conditions are attached

The project must comply with the requirements of ALL applicable Codes and Ordinances