

LAKE SHASTINA PROPERTY OWNERS ASSOCIATION

16320 Everhart Drive Weed Ca 96094 Voice 530-938-3281 Fax 530-938-4739

NOTICE OF COMPLETION NEW HOME CONSTRUCTION, ADDITIONS OR MODIFICATIONS REQUEST FOR DEPOSIT REFUND

	OFFICE USE ONLY APPLICATION # ECC MEMBER			
DATE	UNIT# L0			
OWNER NAME	VNER NAMETELEPHONE			
PROJECT LOT ADDRES	S			
PROJECT DESCRIPTION	N			
that an additional \$50.00 r property pins) does not confirm that I am the o	e-inspection fee will be charg omply with plans approved o riginal depositor of all depositions.	ged if the project is not real real real real real real real real	he above project. I understand ready for inspection, (including n with any Articles of the CC & ed to the refund. I understand all inpliance is approved and project	
Depositor's name: (print)		Tele	Telephone:	
Depositor's signature:		Date	Date:	
Depositor's mailing addre	ss:			
Must be sent to the Associ	ciation office with the top fi	led in and executed for	deposit refund to be processed	
OFFICE USE ONLY Environmental Control (Committee: Inspected By:_		Date:	
APPROVED: DEN	IED: Final inspection of	check list attached or on	back.(ECC approval date)	
Plan changes need to be fi	led by owner to update appro	ved plans for file	Yes No	
Comments:				
Re-inspection: Inspected	By:	Date	Charge \$	
APPROVED: DENIE	ED: Final inspection ch	eck list attached or on b	ack.(ECC approval date)	
Public Works: Applicab	ublic Works: Applicable Not Applicable Drainage Final Date		al Date	
Sewer Final Date:	Water Final Date:	Driveway Ar	Driveway Apron Final Date:	