

**River's Edge Owners Association
Architectural Review Control Request Form**

Architectural Review Committee Decision:	
Conditional Approval <input type="checkbox"/> Disapproval <input type="checkbox"/>	
ARC requirements or comments on application (if any):	
Architectural Review Committee Member Signature:	
Date: _____	
As-Built Inspection Approval:	Date: _____

Signature of Two Most Affected Neighbors. Since their properties are adjacent to, or have a view of the modification they are considered most affected. Signatures indicate that the homeowners are aware of and have been given the opportunity to review the plans as they are to be submitted to the ARC. A homeowner's signature does not reflect approval or disapproval of the proposal. If a homeowner wants to express concern on a proposed change, he or she should promptly submit a letter to the ARC Committee or be present at the next ARC Meeting to verbally express their concern.

Two Neighbor Signatures:

 ☐
Name, Lot #

☐ ☐
Name, Lot #

Important Note: The Architectural Review Committee is not responsible for determining compliance with structural and building codes, solar ordinances, zoning codes or any other governmental regulations, all of which are the responsibility of the applicant. It is the applicant's responsibility to check with the local building department, and to also ensure that the improvements do not impact existing easements or extend outside boundary lines of the Property.

It is the applicant's responsibility to protect all elements inside the Association easements, and to return any area disturbed by the installation of a modification to the same standards as previously existed. Upon completion of the improvement, the Association shall review and determine that the installation is in compliance with the approval provided. If the improvements are deemed incomplete or further work is necessitated, the applicant shall be provided with a deadline for the completion of the work.

The timeline for project completion is 3 months unless a different timeline is specified in the approval of the application. If improvements are not completed to the satisfaction of the Association within the timelines provided, the applicant shall submit a request for an extension. Non-compliance may result in fines being assessed to the applicant's account.

All Architectural Review Control Request Forms will be reviewed within 30 days of receipt by the Committee/Board. A copy of the completed request signed by a committee member will be e-mailed to Owner unless other form of notification is requested by Owner.

Send Request To:
River's Edge Owners Association
c/o Mile High Community Management
P.O. Box 1048, Bend, OR 97709
PHONE (541) 598-7662 FAX (541) 598-3014
EMAIL: info@milehighmgmt.com

River's Edge Owners Association Architectural Review Control Request Form

In accordance with the Association's documents and Architectural Review Procedures and Guidelines, I hereby apply for written approval to make the following exterior alterations or changes to my property.

Request Date: 12.31.25

Owner's Name: Wayne G Ernst

Owner's Address: 2836 NW Golf Course Dr. S

Phone Number: 5414807983

E-Mail: gernst72@gmail.com

*This form reflects the most often requested approval types. If you do not see a category that matches the nature of your request, please use the **Other Feature** section for your request.*

☐ **Roofing Brand:** Material: Color: Style:
(A product sample is required with this application.)

☐ **Exterior Color:** Brand: Color # and Name:
(Paint color samples are required with this application. Please paint your color choices on a sample board so that the committee can review them.)

☐ **Landscaping:** Tree type: Location:
Planting Size: Mature Size:
(A lot layout showing the location of the proposed mature tree installation is required with this application. Please note: Large trees may be deemed a nuisance and vision/view blocker to adjoining neighbors when they are full grown. You may be requested to notify neighbors affected by the proposed installation for their approval.)

☐ **Decks/Gazebos/Pergolas:** Location: Size: Color:
Height at Eaves: Height off Ground: Material:
(A lot layout showing the location of the proposed deck/gazebo/pergola along with a picture and a cross section view of the structure is required with this application. You may be requested to notify neighbors affected by the proposed installation for their approval)

☐ **Other Modifications:** Description: Windows and Sliding Doors Replacement
Location: Color: Size:
Height: Material:
(A lot layout showing the location of the proposed modification along with a picture of the item is required with this application.)

Additional Information: The downstairs windows and the upstairs sliding glass doors will be replaced. I believe the information I sent previously has the information concerning the color and size of the windows and doors.

Homeowner Signature: Wayne G Ernst 1/7/2026