

# Sun City Lincoln Hill ARC Application Checklist

## Equipment & Machinery

## Checklist 07

Equipment or machinery that is generally used in the operation, maintenance or construction of a home or other improvements may be operated on any Lot, provided it complies with the CC&Rs.

An application and approval is **NOT** required if the replacement equipment is the same size and type as the original equipment and is installed in the original location.

This Checklist is for GUIDANCE ONLY, please refer to the CC&Rs and the Design Guidelines for all other specific requirements relating to your project.

**OWNER CHECKBOXES (Must be filled in or noted N/A)**

**ARC CHECKBOXES**

**Brief Project Description** \_\_\_\_\_

**Required Documents**

- Drawing showing the location and size of the equipment, including height.
- Drawing showing the size, height, detail and color of the equipment screen or landscape screening.
- Photograph of the adjacent property directly across from the equipment location.
- All equipment visible from the street or neighboring property will be screened by a structure no higher than one foot (1'-0") above the equipment, or by plant material of adequate density to accomplish the same result, when planted. In no event will the equipment or screening height exceed five feet (5'-0").
- The screen design conforms to the design of the home, in style, detailing, materials and color. If a stucco finish is used the paint color will be compatible with the home's main body color.
- Air conditioner condenser units will not encroach more than thirty-six inches (36") into the minimum side yard setback. Pools, spas and other related equipment will maintain the required side yard setback.
- Roof mounted mechanical or air conditioning equipment and window or wall HVAC units are prohibited.** (See Checklist 25 for Solar Energy Systems)
- All visual and noise impacts on adjacent properties have been adequately addressed.
- The timeline for completion of work is within 90 calendar days from the start of work and must be completed before the one-year approved application period expires.

**This checklist must be completed and signed by the Owner along with the Architectural Review Committee, (ARC) Application Form**

**Homeowner Use**

Planned Completion Date: \_\_\_\_\_

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Name: \_\_\_\_\_

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

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Signature: \_\_\_\_\_

**ARC Use Only**

APPROVED \_\_\_\_\_

INCOMPLETE \_\_\_\_\_

DISAPPROVED \_\_\_\_\_

Date: \_\_\_\_\_