APPENDIX A MAUNA LANI RESORT COMMUNITY DESIGN COMMITTEE SINGLE FAMILY HOME REVIEW, CONSTRUCTION AND INSPECTION APPLICATION FORM

7/18/22 DATE Manu Liilii, LLC Lot 5 OWNER'S NAME PROJECT SITE/LOT No. OWNER'S MAILING ADDRESS CITY 904-860-0398 STATE HOME PHONE | BUSINESS PHONE | FAX NO. ZIP CODE 503-522-9000 **ARCHITECT TELEPHONE** FAX NO. BUILDING PLAN SUMMARY: (Complete all applicable sections) Finish Floor Elev.: 26.25' Existing Grade: (As Shown on Topographic Map) Square Footage of: (1) Living Area 2,838 (3) Lanais (2) Garage (Please Specify) Stucco Exterior Wall Surface: Percent of Bldg Coverage: 28.65% Grey, Taupe Color of: (1) Wall (3) Misc. Trim Cedar Butternut Grey Black blend (4) Other (2) Roof _____ (Please Specify) [X] Single-Story [] Two-Story Max. Building Height: 20' Architectural Style: Contemporary Hawaiian Roof Pitches: Hip, Dutch Roof Material: Synthetic Slate Garage (Yes/No): Yes No. Cars: 2 Landscape Plan Attached? Under separate cover All Improvements Within Building Envelope? (If NO, explain below.) TOTAL CONSTRUCTED VALUE: \$_____ Other Description: The undersigned Applicant hereby agrees to comply with all Mauna Lani Resort Design Guidelines, Standards and Restrictions and other

conditions which may be required for approval of the Applicant's submittal; authorizes the Mauna Lani Resort Community Design Committee (CDC) to retain professional architectural and engineering services, at the Applicant's expense, for review of the Applicant's submittal; agrees that until final inspection and approval of the completed project has been performed by the CDC, the CDC, or its duly appointed representative, is granted the right to enter the subject property at any time without prior notification for inspection purposes; understands that approvals issued by the CDC are in no way a representation on the part of the CDC that the proposed construction or alteration is in conformance with all applicable governmental codes, restrictions or other requirements and should not be construed as a claim on the part of the CDC regarding the quality, structural integrity or soundness of the work which has been approved.

OWNER'S SIGNATURE ______ Date:_______

SINGLE FAMILY HOME SUBMITTAL CHECKLIST AND PROCEDURAL SUMMARY