



*City of Foster City*

**ESTERO MUNICIPAL IMPROVEMENT DISTRICT**

610 FOSTER CITY BOULEVARD  
FOSTER CITY, CA 94404-2222

**Architectural Review Notification Report**

To: Director of Community Development Department (to be completed by City staff)  
Community Development Department  
City of Foster City  
610 Foster City Boulevard  
Foster City, CA 94404

File No. \_\_\_\_\_

**The applicant must complete the items below:**

I have provided the property owners listed below with an "Architectural Review Neighbor Notification Form", an envelope to return the form by mail, and an opportunity to review the plans dated \_\_\_\_\_ for a construction project at \_\_\_\_\_ consisting of \_\_\_\_\_.

Name	Address	Date Notified	Indicate if contact was by mail or in person

I hereby certify under penalty of perjury that the foregoing is true and correct.

Dated: \_\_\_\_\_

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

Name (print): \_\_\_\_\_

*Please return this form to the Community Development Department with your application.*