

Paradise Manor Association

c/o Cornerstone Properties, Inc.
P.O. Box 62073
Phoenix, AZ. 85082-2073
602-433-0331 amanda@cpihoa.com

ARCHITECTURAL REQUEST FORM

NAME(S): _____

ADDRESS: _____ LOT # _____

PHONE: (home) _____ (mobile) _____ EMAIL: _____

NOTE: A MAXIMUM OF 30 DAYS IS REQUIRED TO PROPERLY REVIEW AND RESPOND TO IMPROVEMENT REQUESTS.

Prior to committee review, the homeowner must sign to verify that:

1. Association fees are paid and current.
2. No liens and/or fines are owed to the Association.
3. I understand and agree that no work on this request shall commence until written approval by the Architectural Committee has been received.

APPLICATION INSTRUCTIONS: In addition to this application, you will need to submit the following attachments:

- A: Full details of purpose and/or reason for improvement.
- B: Site plan with location of improvement drawn to scale. Note distance from property lines. Show relationship of improvement to neighboring homes and/or open spaces.
- C: Scale drawings and/or illustrations showing design of proposed improvement and relationship to existing house.
- D: Type, color and size of improvement and materials.
- E: Photos of house/lot as it currently exists.

1. Description of work to be done: _____

2. Type of materials to be used: _____

3. Color(s) to be used (include sample paint chips or materials if appropriate): _____

4. Dimensions of structure (heights, width, etc) if applicable: _____

5: Work to start within _____ days of approval.

Work to be completed within _____ days after approval.

Will permits from Phoenix be required? ____ Yes ____ No

Contractor Name: _____

Address: _____

Phone No: _____ License No: _____

Architectural Committee decisions will be returned within 30 days. Requests will either be approved, denied or returned for additional information. All approved requests are subject to an Architectural Committee completion review to assure the project has been completed as approved. If deviation from the approved requested has occurred, the homeowner will be responsible for taking corrective action within 30 days to adhere to the request approval as granted.

HOMEOWNER SIGNATURE _____ DATE _____



_____ **REJECTED:** Reason for rejection:

_____ **REVIEW WITH CONDITIONAL APPROVAL:** This approval is subject to all applicable City and State permits, codes and regulations. These are the responsibility of the homeowner. The Architectural Change Form submitted was approved with the following changes required:

_____ **REVIEW WITH APPROVAL:** The Architectural Change Form submitted has met the requirements of the Paradise Manor Association. This approval is subject to all applicable City and State permits, codes and regulations. These are the responsibility of the homeowner.

BY:

HOA Representative _____ Date _____



COMPLETION REVIEW OF REQUEST

COMPLETION APPROVED: _____ Date _____