

Applicant Information

Name: [Click here to enter text.](#)

Address/Lot: [Click here to enter text.](#)

Phone 1: [Click here to enter text.](#) Phone 2: [Click here to enter text.](#)

Project Information

This information is being requested in accordance with the Homeowners Association CC&R's.

Areas for Review: *(select all that apply)*

- | | | |
|---|--|--|
| <input type="checkbox"/> New Home | <input type="checkbox"/> Building Addition | <input type="checkbox"/> Other man-made structure |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Fence/Deck/Patio | <input type="checkbox"/> Tree House/Play Structure |
| <input type="checkbox"/> Shed | <input type="checkbox"/> Dog Run | <input type="checkbox"/> Antenna/Satellite Dish |
| <input type="checkbox"/> Outdoor Lighting | <input type="checkbox"/> Roofing | <input type="checkbox"/> Major Landscape project |

Project Description: *(please provide a short description of the project and any specific information that may be helpful)*

[Click here to enter text.](#)

Contractor Information: *(please provide name and contact info of the contractor handling your project)*

[Click here to enter text.](#)

Instructions:

Please submit two copies of the following as it applies to your project:

- Paint Color (2 sets of chips including paint brand and number)

NOTE: Color change requires neighbor review. Please review color selection with your neighbors and include their approval in the details section below or in a separate email to: tom@aznorth.com

- | | | |
|--|---|---|
| <input type="checkbox"/> Final (working) plans and specifications | <input type="checkbox"/> Building elevations | <input type="checkbox"/> Type of material and colors to be used |
| <input type="checkbox"/> Site plan showing building location, property line setbacks, location of septic tanks and primary/secondary drain fields. | <input type="checkbox"/> Copy of building permit <i>(if applicable)</i> | <input type="checkbox"/> Anticipated impact on neighbors |
| | <input type="checkbox"/> Any other pertinent information | |

Owner _____ Date _____ Approved by _____ Date _____

Note: All work must conform to CCR's and City building requirement. Contact: Tom@aznorth.com