

PREFERRED COMMUNITIES

"LOVING WHERE YOU LIVE."



Architectural Request Form

Preferred Communities

PO Box 5720

Mesa, AZ 85211

Email: info@gothoa.com Fax: 480-649-0902

Requester/Homeowner Information

Date: _____

Name: _____ Account/Lot Number: _____

Property Address: _____ Telephone: _____

General Description of work to be completed: Include dimensions, shapes, colors, and locations.

*Please attach a sketch, photograph, or sales brochure which illustrates desired additions and/or modifications.

Signing this request specifies that I will assume the responsibility for any work under the above proposed improvement that my contractor or I accomplish which may, in the future adversely affect to common area. I will assume responsibility for all future maintenance of this addition or improvement.

Notice to Owners

1. Submissions will not be considered if the homeowner is not current with the payment of assessments.
2. It is your responsibility to obtain permits (if needed) from the City/County before submitting to the Association for approval.
3. The Architectural Committee has the right to reject any submittal if all required information is not submitted or legible.
4. All work must be completed within 90 days of approval from the HOA.
5. Homeowner MUST notify Management Company upon completion of project (an inspection by the Association will be conducted to verify project was completed based on specifications submitted).

Homeowner's Signature: _____ Date: _____

If the requested change requires adjacent owners input prior to installation, the adjacent owners must sign below to indicate that they have no objections to the proposed change.

#1—Owner Signature: _____ Date: _____

#2—Owner Signature: _____ Date: _____

For Committee Use Only

Date received by Architectural Committee: _____ Date of Decision: _____

Approval: _____ Disapproval: _____

Date homeowner completed project: _____

Date project completion inspection conducted: _____