

ARCHITECTURAL IMPROVEMENT APPLICATION AND REVIEW

Note: To avoid delay, make request as complete as possible or it will be returned for more information or denied as appropriate. Deed restrictions specify that approval must be obtained prior to construction.

Homeowner Name:		
Property Address:		
Mailing address (if different):		
Phone:	_ E-mail:	
Describe Modification/Improvement Proj	ect, including dimensions, location and materials involved	d

ANNA RANCH HOA

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Was the City of A	ed the Declarations of CC&l nna contacted about necessa		YES NO YES NO	
		n the street in front of home?	YES NO	
will this project re	equire temporary removal of	the rence?	YES NO	
Preferred Project s	tart date:	_ Estimated completion date:		
Name, address, ph	one number(s) of Contractor	r(s) performing work:		
Attach copy of pla	ntractor's plans and/or drawing tractor indicating where maping must indicate name of	odification/improvement will oc	ecur	
Owner's Signature	submitting completed appli	cation and acknowledging infor	mation is correct.	
Property Address				
Homeowners Signature		——————————————————————————————————————	Date	
This application m	nust be scanned and attached	to an email to:		
Email: <u>Dale@Leg</u>	acysouthwestpm.com			
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	Œ- · A	CC Committee Her Oales		
ACC Decision (cir		CC Committee Use Only)		
	DISAPPROVED	DENIED PENDING MOI	RE INFORMATION	
APPROVED				