

ARCHITECTURAL SUBMITTAL FORM

VILLA DEL MONTE HOMEOWNERS ASSOCIATION

5143 E. Monte Vista Rd, Phoenix, Arizona 85008

Phone: (480) 286-0936

Villadelmonte@live.com

(Please type or print. Incomplete or illegible submittals will be returned.)

Member Name:	Ph #:
Address:	Cell #:
Email:	Lot #:
Contractor:	License #:
Ph #:	
Description of work to be performed:	
Time period in which work is to be completed:	
Materials to be used (attach samples of hardscape materials):	
Color scheme :	

Attach two (2) copies of drawings and/or blueprint of your submittal. Please indicate all materials, dimensions, color and the exact location of the proposed work to be completed. Drawings or brochures of similar projects may also be submitted. Major construction projects MUST include elevation drawings. INCOMPLETE REQUESTS WILL BE RETURNED.

You must have written approval from the Design Review Committee prior to making any improvements or exterior changes to any part of your lot. To avoid misunderstanding, you cannot proceed with an improvement or exterior change on the basis of a “verbal” approval or “oral” representation. Your cooperation in submitting for approval prior to installation is mandatory and greatly appreciated. If you have any questions regarding your submittal, please contact the HOA at (480) 286-0936.

BY SIGNATURE BELOW, I ACKNOWLEDGE AND AGREE TO THE FOLLOWING TERMS

- If this application/form is for any architectural change or improvement other than new construction and/or rebuilds of the main residential structure, I acknowledge and agree that the association does not need to comply with A.R.S. Section 33-1817(B 2 a-e).”
- Maintain all improvements made on my property. Understand that I am responsible for debris/damage done to common areas by me or my contractors.
- Comply with all applicable City and State laws and obtain all required permits.
- Begin no work until I have received approval, in writing, from the Design Review Committee.
- *If the submittal is not signed be aware that it will be returned to you for a signature before it is send to the Committee.*

Signature: _____

Date: _____

FOR DESIGN REVIEW COMMITTEE USE ONLY

<input type="checkbox"/> Approved	<input type="checkbox"/> Approved with Stipulations	<input type="checkbox"/> Denied	<input type="checkbox"/> Returned for Additional Information
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DRC COMMENTS:

Date Rec'd by VDA: _____ **Date Rec'd from Committee:** _____

Date Rec'd by DRC: _____ **See additional comments on back of this sheet.**

DRC Signature: _____ **Date Signed:** _____