

San Ignacio Vistas Inc  
ARCHITECTURAL COMMITTEE

**APPLICATION FOR ADDITIONS AND/OR ALTERATIONS**

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Lot #: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

**DESCRIPTION OF PROPOSED WORK**, materials and color(s) Attach supporting information such as contractor proposals, mechanical drawings or literature from the manufacturer, photos or other representations of improvements that would help to describe the project. (Note that it is the Owner's responsibility to obtain the necessary permits, such as a Pima County building permit.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Use the reverse side if required.

Date work to begin: \_\_\_\_\_ Estimated completion: \_\_\_\_\_

Work to be performed by Homeowner \_\_\_\_\_. If not, please complete the following:

Contractor Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Contractor Phone Number: \_\_\_\_\_ License Number: \_\_\_\_\_

I have alerted the neighbors on either side of my lot regarding my plan to construct any structure that is outside of the existing footprint of my home as evidenced by their signatures

Lot \_\_\_\_ Lot \_\_\_\_

\_\_\_\_\_

I have read (and acknowledge) the applicable Rules that govern the requested procedure.

Please sign and date:

\_\_\_\_\_  
Applicant's signature Date submitted

FOLLOWING TO BE COMPLETED BY THE COMMITTEE

TRACKING NUMBER: \_\_\_\_\_ DATE RECD: \_\_\_\_\_ ADDITIONAL INFO REQUESTED: \_\_\_\_\_

DATE REVIEWED: \_\_\_\_\_ COMPLETED APPLICATION: \_\_\_\_\_

ACTION: \_\_\_\_\_

Requires Signed Agreement to Restore/Repair Common Area: \_\_\_ No \_\_\_ Yes Received \_\_\_\_\_

Upon completion call to arrange for final Inspection \_\_\_\_\_

Committee Signature \_\_\_\_\_ Date \_\_\_\_\_

