

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 _____

