

SANDCASTLE HOMEOWNER'S ASSOCIATION
ARCHITECTURAL APPROVAL REQUEST FORM
(PLEASE PRINT CLEARLY)

Name: _____ Lot/Unit# _____ Phone #: _____
Address: _____ Work: # _____

Plot plans, drawings and specifications, as required, must be attached with a complete description of the proposed change. A City building permit, if applicable, must be submitted with this application. All supporting documents WILL NOT be returned, as they will become a part of the permanent record in your homeowner file. Approval or Disapproval will be mailed to you within 60 days after receipt of a complete application.

DESCRIPTION OF ARCHITECTURAL REQUEST IN DETAIL INCLUDING:

Dimensions: _____
Materials: _____
Location: _____
Colors: _____

PLEASE SUBMIT A SKETCH OR DRAWING OF THE PROPOSED CHANGE

Work to be performed by: _____
(GIVE CONTRACTOR NAME & PHONE NUMBER)

Start Date: _____ Estimated Duration _____ (In weeks) Completion Date: _____

SUBMIT TO: Sandcastle HOA
c/o Cornerstone Properties Inc
4523 E. Broadway Rd. Phoenix, AZ 85040
Attn: Steve Johnson Or Fax to: 602-244-9214 Attn: Steve Johnson

The Homeowner agrees to maintain the improvement if approved by the Architectural Committee. If, in the view of the Board of Directors of the Association, the improvement is not being maintained, the Association has the right to remove or maintain the improvement with the Homeowner assuming all financial responsibility. **The Homeowner agrees to comply with all City, County and State laws and must obtain all necessary permits.**

Signature of Lot Owner Date Signed

OFFICE USE ONLY
THE ABOVE-DESCRIBED ARCHITECTURAL CHANGE IS:

___ APPROVED ___ DISAPPROVED ___ APPROVED WITH THE FOLLOWING CONTINGENCIES:

DISCLAIMER: Neither the Architectural Committee, Board of Directors, nor Homeowners' Association shall assume any liability in connection with or related to approved or disapproved improvements. An approved submittal does not in any way constitute an approval of the structural integrity of the improvement or its effect upon the existing structure and landscaping drainage.

Signature Of Committee Member Signature of Committee Member

Date Date

THIS CHANGE IS TO BE COMPLETED WITHIN 60 DAYS FROM DATE OF APPROVAL.