StoneRidge Estates HOA Modification Request Form (To be used for any alteration, addition or modification to structure of landscape as required by CC&Rs...)

Name:		Date:	Unit #:	
Signature of Owner:				
Mailing Address: E-mail			mail	
Daytime Phone:	A	Alternate Phone:		
Requesting Approval of:				
Type of Material (attach san	mples/pictures/br	ochures where applicat	ple):	
Colors to be used (attach san Estimated Date of Complet			ble):	
Read and Initial all items b	elow:			
Submittal must include a p dimensions.	olat plan indicating lo	ocation of requested alteration	on and all applicable measurements and/or	
	Applications will not be considered if filed by owners who are delinquent in payment of fees, fines or other charges.			
Incomplete submittals will				
	• •	e street without express writt	•	
Approval by the Committee construction, installation, a	ee of Architecture shaddition, alternation,	all not be deemed a warrant	to obtain all necessary permits. By or representation as to the quality of such that work conforms to any applicable or regulations.	
Architectural Design reque	est will be reviewed	within 30 days.		
	Estates HOA Commi		Red Mountain Management nmaz.com or by fax to 480-664-1603	
Request received by		below is for committee use		
Request was reviewed by th			and is	
COLO CONTRO			y Approved:	
COMMENTS:				
Architecture Committee:				
	(Signatu	re of committee represe	entative)	