Capriana Homeowners Association
www.CaprianaHOA.com
c/o **Total Property Management**
4020 N 20th St, Suite 219
Phoenix, AZ 85016

Request of Approval of Architectural Change

Name _____ Lot No _____

Address _____ Phone _____

Enter a description of request in detail (use additional sheets and drawings as necessary. Also Please include contractor name, address and phone number along with the type of materials to be used, color (s), dimensions of structure as applicable. Attach any drawings to this form:

Work to be performed by _____

Submit to **Total Property Management**
4020 N 20th St, Suite 219
Phoenix, AZ 85016
(W) 602.952-5581 (F) 602.952-7265

The homeowner agrees to maintain the improvement if approved by the Board of Directors or their duly appointed representative. If in the view of the Board of Directors, the improvement is not being maintained, the Association has the right to remove or maintain the improvement with the Homeowner bearing all costs.

The homeowner agrees to comply with all city, county and state laws and to obtain all necessary permits.

_____ _____
Signature of Lot Owner Date Signed

For Architectural Committee Use
The Above Architectural Change is __ Approved __ Not approved __ Approved subject to the following conditions

THIS CHANGE TO BE COMPLETED BY _____

Signature of Architectural Committee Member _____ Date _____