ARCHITECTURAL CHANGE REQUEST FORM Please mail to: Pecos Vista Homeowners Association Attn: Annette Copple c/o Metro Property Services annette@metropsaz.com 150 E Alamo Drive Chandler, AZ 85225 Phone: (480)967-7182 Ext 105 Fax: (480) 921-9031

Name:	Date:
Property Address	Lot # Phone#
Current Mailing Address:	Receive response via email: YES or NO (please circle)
	include plot plan indicating placement of improvement; color sample(s); plicable brochures)
Worked to be performed by:	Phone:
doors. Side walls adjacent to the home are of Pecos Vistas. In those instances, the sid	nes for the following: (1) fascia; (2) pop outs; (3) base; and (4) garage to be painted the base color unless they are part of the perimeter walls de/perimeter wall is to be painted Walnut Wash. Physical, hard copy st for colors not identified in the community approved paint color list.
INCOMPLETE SUBMITTALS WILL BE DENIED	
deviations from the plans, specifications, and lo Committee. The Homeowner agrees to maintain not being maintained, the Association has the ri costs. The Homeowner agrees to comply with a Covenants, Conditions, and Restrictions; Article	Intil written approval has been received by Homeowner. There shall be no cation approved by the Committee without the prior written consent of the in the improvement. If, in the view of the Board of Directors, the improvement is ight to remove or maintain the improvement with the Homeowner bearing all lil city, county, and state laws and obtain all necessary permits. Refer to our a 3, Section 3.5.
dee	med to have lapsed and withdrawn.
Architectural Design Committee requests will additional information.	be reviewed within 30 days. Requests will be approved, denied or returned for
Design Guidelines. I understand that Neither the Association or Management Company shall as	local ordinances and The Pecos Vista Architectural Committee Rules and e Architectural Review Committee, Board of Directors, Homeowners sume any liability in connection with or related to approved or disapproved t in any way constitute an approval of the structural integrity of the ucture and landscaping drainage.
Homeowner Signature:	Date:
Homeowner E-mail address:	
The Abov	"Office Use Only" e Described Architectural Change Has Been
APPROVED	subject to the following condition(s):
DISAPPROVED	
SIGNATURE	DATE