

PLAN SUBMITTAL FORM
Arden Park Homeowners Association

Voice (480) 345-0046 Fax (480) 345-1728

Mail: P.O. Box 11330 or Hand Deliver to: 7955 S Priest Dr, Ste 105
Tempe, AZ 85284-0023 Tempe, Arizona 85284

Name(s) _____ Lot # _____ Subdivision _____
Mail Address _____ City _____ State _____ Zip _____
Lot Address _____ Phone (home) _____ (work) _____
Fax (home or work) _____
Contractor Name _____ Phone(office) _____ (mobile) _____
Contractor Address _____ City _____ State _____ Zip _____
Plan Description: _____

PLAN INFORMATION (Please complete all applicable items)

Antenna/Satellite Dish Awnings Basketball Goal Concrete Addition Dwelling Addition Decorator Wall Flagpole Gates Gutters Patio Cover Play Structure Pool Accessory Ramada Solar Panels Storage Shed Other (describe) _____
Corner Lot: Yes No
Existing Driveway: Two Car Three Car
House Color:* (Exterior) _____ (Trim) _____
Roofing Material:* (Pitched) _____ (Flat) _____
Roofing Color:* (Pitched) _____ (Flat) _____
Solar Panel Location(s): _____ Solar Panel Contractor _____
Solar Panel Manufacturer: _____ Model: _____
Satellite Dish Model: _____ Location: _____ Size: _____
Other Comments to the Board: _____

*Samples of all materials and colors must be provided. Brochures and manufacturer's color samples are preferred so they may be filed. Samples will not be returned.

I/We certify the following:

1. I/We are the owner(s) of Lot # _____ in Arden Park.
2. I/We have a copy of the current Design Guidelines (DG) for this property.
3. I/We have a copy of the Covenants, Conditions, & Restrictions (CC&R's) for this property.
4. The attached plan is in compliance with the DG & CC&R's.
5. The attached plan is an accurate readable drawing, preferably no larger than 11" x 17", showing the exact location of the proposed improvement(s).
6. The attached plan is being submitted for approval of the Arden Park Design Review Committee prior to the commencement of any changes to the property.
7. Any future additions or modifications to this plan, or any future plans will be submitted for approval of the Arden Park Design Review Committee prior to the commencement of any changes to the property.
8. I understand the Design Review Committee has 45 days to review and that no verbal approvals and/or disapprovals will be given by the management company and that the Committee's decision will be mailed to me.

Signature of Owner

Date

Signature of Owner

Date

For Design Review Committee Purposes Only.

The above-described request is: _____ Approved

Comments:

Signed: _____

Date: _____

The above-described request is: _____ Disapproved

Comments:

Signed: _____

Date: _____