

Please Return to Cornerstone Communities: [sunset@azsmartliving.com](mailto:sunset@azsmartliving.com)

**ARCHITECTURAL APPLICATION**

Community Name: Arizona Sunset HOA  
Property Owner(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Lot # \_\_\_\_\_ Phone # \_\_\_\_\_  
Email: \_\_\_\_\_

Brief Description of Improvement: **Please fill out 2<sup>nd</sup> page**  
Anticipated Starting Date: \_\_\_\_\_  
Completion Date: \_\_\_\_\_

(No changes may be made in plans after approval without written consent)  
Please submit as much information for the decision making process as possible, i.e. drawings, sketches, plans, plot map, pictures, samples, brochures, dimensions, distances from fence or neighbor, etc.

If using a contractor: Name: \_\_\_\_\_  
Address and Phone: \_\_\_\_\_

Applicant understands and acknowledges that the Association’s approval of Applicant’s architectural request shall not be deemed as an approval or consent as to other private covenants or restrictions which may affect the applicants property, (i.e., other than those of the Association); nor shall any such approval or consent be deemed as the approval or consent of the City of the residential unit or any other governmental body having jurisdiction of the applicant’s property. Applicant also understands that the Committee has up to 30 days to review the application. In addition, the applicant will not begin the above project until the application has been approved by the Committee.

**ACKNOWLEDGEMENT**

Let this serve as a written notice that I \_\_\_\_\_ owner of the above address, will assume all responsibility for applying for review and approval of my application, PRIOR to obtaining a building permit from the city. Applicant understands that any damage to community property will be the sole responsibility of the applicant as will the cost of repair. It is the responsibility of the applicant to provide the approved documentation to any purchaser of the above mentioned property.

Applicant(s) signature: \_\_\_\_\_ Date: \_\_\_\_\_

-----**FOR ARCHITECTURAL COMMITTEE USE**-----

<input type="checkbox"/>	APPROVED
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<input type="checkbox"/>	DENIED
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<input type="checkbox"/>	APPROVED WITH CONDITIONS
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Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Project must begin within \_\_\_\_\_ days, and be Completed within \_\_\_\_\_ days.

