

**SILVER SPRINGS GARDEN HOMES HOMEOWNERS ASSOCIATION**

**ARCHITECTUAL COMMITTEE REQUEST FOR APPROVAL**

THE SILVER SPRINGS HOMEOWNERS ASSOCIATION COVENANTS, CONDITIONS, AND RESTRICTIONS REQUIRE THAT AN OWNER OBTAIN PRIOR WRITTEN APPROVAL FOR ANY LANDSCAPING CHANGE, EXTERIOR ALTERATION OR ADDITION TO THEIR PROPERTY.

PLEASE COMPLETE THIS FORM AND, IF APPROPRIATE, ATTACH A DETAILED DRAWING OR BLUEPRINT OF THE PROPOSED ALTERATION OR ADDITION. THE DRAWING SHOULD CONTAIN DIMENSIONS, MATERIALS, COLORS, SET BACKS FROM PROPERTY LINES, ETC.

**SUBMIT REQUEST VIA US MAIL TO: SSGH HOA 655 Silver Springs Cir, Cottonwood AZ 86326**

INCOMPLETE SUBMITTALS MAY BE RETURNED PENDING A COMPLETE SUBMISSION. THE SUBMITTAL WILL BE RETAINED FOR THE ASSOCIATION'S RECORDS. THE COMMITTEE WILL ACT WITHIN 30 DAYS OF RECEIPT OF YOUR REQUEST. YOU WILL BE NOTIFIED IN WRITING OF THE DETERMINATION.

THE OWNER AGREES TO COMPLY WITH ALL CITY AND STATE LAWS AND OBTAIN THE NECESSARY PERMITS FOR ANY ALTERATIONS OR ADDITIONS.

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**Homeowner Name:** \_\_\_\_\_

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**Property Address:** \_\_\_\_\_

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**Phone # (day):** \_\_\_\_\_ **Phone # (evening):** \_\_\_\_\_

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**Description of Desired Addition or Alteration:**

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**Work to be Performed By:** \_\_\_\_\_

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**Contractor Name:** \_\_\_\_\_

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**Contractor Phone #:** \_\_\_\_\_

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**Owner Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**ARCHITECTUAL COMMITTEE APPROVAL Signature:** \_\_\_\_\_

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**Date:** \_\_\_\_\_

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*This permission is valid for six months from date of approval*