HOLLIDAY FARMS COMMUNITY ASSOCIATION Request for Architectural Approval

NAME		LOT	
ADDRESS	DDRESSPHONE NO		
	se include type of materials	etail and use additional pages and to be used, color(s), dimensions of s	
Work to be perf	formed by:		
or their duly a improvement is improvement w	appointed representative. not being maintained, the A	provement if approved by the Board If, in the view of the Board of Essociation has the right to remove or all costs. The Homeowner agrees to all necessary permits.	Directors, the maintain the
Signature of Homeowner		Date	
Submit to:	Holliday Farms Commu c/o FirstService Resident 9000 E. Pima Center Par Scottsdale, Arizona 8525 Telephone: 480-551-430 Email: adminsupport.azo	ial kway, Suite 300 8 0 Fax: 480-551-6000	
	FOR ARCHITECTURA	L COMMITTEE USE ONLY:	
The above descr	ribed architectural change is	:	
Approved	DisapprovedApp	roved subject to the following condition	ons:
Work must be c	completed within six months	from the date of approval.	
Association Representative		 Date	