

**ALPINE HEIGHTS**  
**Request for Architectural Approval**

**NAME:** \_\_\_\_\_

**LOT#** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

Provide a description of the Improvement in detail and use additional pages and drawings as necessary. Please include types of materials to be used, color(s), dimensions of structure and location on Lot, if applicable. Be as specific as possible and make sure to include samples where applicable. Work, additions, or modifications must follow Town Of Payson codes. Please include a copy of permits with this application.

**DESCRIPTION OF SUBMITTAL:**

**Proposed construction start date:** \_\_\_\_\_ **Estimated construction completion date:** \_\_\_\_\_

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

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

**License #** \_\_\_\_\_ **\*:Expires:** \_\_\_\_\_

\*The Association recommends that Owners use licensed contractors

**Mail or Deliver to:** **Greg Dix**  
**Alpine Heights Architectural Review**  
**1304 N. Camelot Drive**  
**Payson, AZ 85541**

**Please direct any questions about your submittal to Greg Dix 480-567-2788 or greg@engbygad.com**

\_\_\_\_\_  
**Signature of Owner**

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

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**The above described architectural change is:**

\_\_\_\_\_ **Approved Subject To the following conditions and/or final approval**

\_\_\_\_\_ **Disapproved**

\_\_\_\_\_ **Final Inspection Approval**

**Architectural Review Committee Representative**

**Date**

\_\_\_\_\_

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