

**HOMEOWNER'S ASSOCIATION of CANYON RIDGE
ARCHITECTURAL REVIEW APPLICATION**

Every Homeowner must apply for and receive approval from the Architectural Review Committee (ARC) prior to any alteration of existing improvements or installation of non-existing improvements, per the Declaration and/or Covenants, Conditions and Restrictions of the Association. The Committee will respond to your request within 30 days or less of the Committee receiving the required information. *If the ARC committee requires more information, the response time can be extended.*

Name _____

Address _____ Lot # _____

Phone _____ Email _____

Detailed Description of all aspects of the Modification(s) - attach separate page(s) if needed. Provide a free-hand sketch of your project in relationship to your home (includes sheds, hardscape, patios, retaining walls, etc.). Include the measurements of new structures (if applicable)

1. Is a permit required? _____ Obtained? _____

2. Timeline - Approximate time for completion of project? _____

3. Do you require a dumpster on site? _____ Location: _____

3. Description of material specifics, color of materials, picture of proposed project, link to products (includes roofing projects, sheds, patios, lights, etc.):

4. Exterior Painting with New Paint Colors: Each color code (siding, door, trim, etc.) must be outlined below along with providing the web link to each color code. A 4'x 4' sample of the siding color must be painted on the home for the ARC prior to submitting your application. All color approvals expire six months from the date of approval. After expiration, the owner must resubmit another request to the ARC.

Primary: _____

Trim: _____

Accent: _____

5. Will this impact neighboring or common areas? _____ If so, please have neighbors sign in the section below.

6. Contractors Name: _____

Neighbor Acknowledgement

(A neighbor's signature does not imply approval of the modification; it only indicates that the neighbor has been made aware of this modification request.)

Signature:	Signature:
Address:	Address:
Signature:	Signature:
Address:	Address:

Please list the attachments you are submitting with the request:

Signature of Applicant: _____ Date: _____

**Please email, postal mail or fax request and all attachments to:
The Management Trust**

E-MAIL: thetrustwa@managementtrust.com or submit via the
online web portal at www.my.managementtrust.com
19820 North Creek Parkway, Suite 101 • Bothell, WA 98011
P: (425) 897-3400 • F: (425) 897-3401