Valstate Homeowners Association, Inc. Architectural Design Review Form

Please mail or fax to:
Valstate Homeowners Association, Inc.
c/o Platinum Management, Inc.
P.O. Box 14198
Tucson, AZ 85732
(520) 623-2324 Fax (520) 722-5039

Name:	Date:		
	Daytime Phone:		
	Lot #:		
Requesting Approval of:	····		
Work to be performed by:			
Type of Material (attach samples/pictures/br	ochures):		
Color to be Used (attach samples/pictures/brochures): SUBMITTAL MUST INCLUDE A LEGIBLE PLOT PLAN INDICATING LOCATION OF REQUEST AND INCLUDE ALL APPLICABLE MEASUREMENTS AND DIMENSIONS, INCLUDING SETBACKS FROM EACH EXISTING WALL. INCOMPLETE SUBMITTALS WILL BE DENIED			
		not to begin work until I have been notified to maintain all improvements in their origin	d state laws, and to obtain all necessary permits. I also agree in writing of the Design Review Committee's decision and hal condition. Design Review Committee must review and All work must be completed within 90 days from day of
		Owner's Signature:	Date:
Approved:			
Conditionally Approved:			
Denied:			
Committee Member Signature:	Date:		