REQUEST FOR DESIGN APPROVAL Signal Hill HOMEOWNERS' ASSOCIATION, INC. ARCHITECTURAL CONTROL COMMITTEE

(PLEASE PRINT)

Owner Name	Date:
Property Address	
Mailing Address (if different)	
Work Phone	Home Phone
Email Address	<u> </u>
include a <u>copy of your property plat and</u> <u>addition, distance to property lines from</u> <u>property and relevant surrounding featu</u> <u>following information: style, dimensions</u> <u>and the proposed construction time sche</u>	the the proposed changes or additions to your property. Please of indicate the exact location of proposed change or proposed change or addition, dimensions of backyard ares. Also, this request must include a sketch with the standard and contractor, if any. Requests for repainting must ill not be returned. Should the committee require additional additional information is received.
Notes:	
 the Committee. The Committee has thirty do Once approved, the construction must be coneighboring properties. Applicant has responsibility for removal, in a Construction must meet all zoning, building regarding zoning, call (505) 924-3850. For nothing herein contained shall be construed and the state of charge by New Mexico One Call, and underground communication, cable TV, election 1990 or (800) 321-2537, no later than two fundered the state of the state o	timely manner, of any debris resulting from construction. g codes, and City and County laws. For further information information on building permits call (505) 924-3963. Further, as a wavier or modification of any such code or law. e marked before excavation is started. This service is provided and is required to provide for your safety. For location of ctric, gas, water and sewers call New Mexico One Call at 260-full business days before the day you plan to dig. Please note or conduits are severed.
Owner Signature	Date
Subr	mit this request to:

Submit this request to: enTrust Association Management 2823 Richmond Dr., NE-Albuquerque, NM 87107 Phone: (505) 217-1143; Fax: (505) 266-0300

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Describe proposed changes or additions (attach additional sheets if necessary):				
If approved by the Architectural C days of Notice of App		e proposed improvem	ents will be completed within	
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The adjacent OWNERS have review objections do not in themselves cautheir objections if necessary.				
	Address:		Circle: Approve / Object	
(Signature)	Addiess		Circle. Approve / Object	
(Printed Name)				
	Address:		Circle: Approve / Object	
(Signature)				
(Printed Name)				
	Address:		Circle: Approve / Object	
(Signature)	Address.		Circle. Approve / Object	
(Printed Name)				
=======================================	FOR OFFICE U	======================================		
	TOROTTEE	JOE OIVET		
Date Received:	Submitted to Architectural Control Committee on:			
Action:	ApprovedD	eniedC	onditional Approval	
Decision Letter sent on :			<u> </u>	