

**LA PAZ NUEVO HOMEOWNERS ASSOCIATION  
ARCHITECTURAL IMPROVEMENT REQUEST**

Date: \_\_\_\_\_

Requested By: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

To: ARCHITECTURAL REVIEW COMMITTEE

I hereby request your approval of the installation of the following improvement to my unit: (Describe the proposed improvements and attach a drawing showing type, style, dimensions, materials, color and location): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Homeowner is responsible for any damages done to the common area during and/or after construction of improvements.

If a contractor is used, a Certificate of Insurance must be given to the Association's manager that lists the Association and Management as the additional insured prior to commencement of the improvement. If a building permit is required, it must be obtained prior to construction.

TO BE CONSTRUCTED BY: \_\_\_\_\_

PROPOSED DATE OF CONSTRUCTION: \_\_\_\_\_

ANY COMMENTS FROM APPLICANT: \_\_\_\_\_

**DO NOT WRITE BELOW THIS BOX**

**ARCHITECTURAL REVIEW COMMITTEE ACTION:**  
 APPROVED     DECLINED     MORE INFORMATION NEEDED

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**DATE:** \_\_\_\_\_

**BY:** \_\_\_\_\_

\_\_\_\_\_  
**ARC MEMBER SIGNATURE**

\_\_\_\_\_  
**ARC MEMBER SIGNATURE**

\_\_\_\_\_  
**ARC MEMBER SIGNATURE**

\_\_\_\_\_  
**ARC MEMBER SIGNATURE**

**LA PAZ NUEVO HOMEOWNER'S ASSOCIATION**  
**IMPACTED NEIGHBORS STATEMENT**  
AS REQUIRED, IF AFFECTED

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

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

IMPROVEMENT FOR REVIEW: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

ON \_\_\_\_\_ 20\_\_\_\_\_, I presented the attached plans to all affected neighbors for their review. Each neighbor has been notified that the plans are being submitted for approval.

1. Adjacent Neighbor: \_\_\_\_\_ Telephone \_\_\_\_\_

Signature: \_\_\_\_\_ Address: \_\_\_\_\_

2. Adjacent Neighbor: \_\_\_\_\_ Telephone \_\_\_\_\_

Signature: \_\_\_\_\_ Address: \_\_\_\_\_

3. Adjacent Neighbor: \_\_\_\_\_ Telephone \_\_\_\_\_

Signature: \_\_\_\_\_ Address: \_\_\_\_\_

4. Adjacent Neighbor: \_\_\_\_\_ Telephone \_\_\_\_\_

Signature: \_\_\_\_\_ Address: \_\_\_\_\_

5. Adjacent Neighbor: \_\_\_\_\_ Telephone \_\_\_\_\_

Signature: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
HOMEOWNER SIGNATURE

\_\_\_\_\_  
TELEPHONE

**NOTE: Specific objections by neighbors may be noted on the back of this form for committee consideration. Neighbor objection does not, cause denial, however the Board of Directors may contact neighbors for additional information.**

**RETURN TO:**  
**La Paz Nuevo Homeowners Association**  
**C/O P & G Association Management**  
**jen@pandgmanagement.com**  
**129 W Lake Mead Pkwy #16**  
**Henderson, NV 89015**  
**(702) 202-4330 Fax: (702) 202-3910**