

**Spring Oaks II Homeowners Association
PROPERTY IMPROVEMENT APPLICATION**

NAME: _____ DATE: _____

ADDRESS: _____ UNIT #: _____

PHONE: (H) _____ (W) _____ Proposed Completion Date _____

All Applications Must Be Submitted With A Plan To Scale

TYPE OF ARCHITECTURAL IMPROVEMENT

____ Window/Screen
____ Security Door
____ Satellite Dish/Antennae
____ Other

Materials to be Used:

Additional Comments: _____

____ PAINTING: Doors – New Color _____

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE THE REVERSE SIDE OF THIS FORM.)

For Association Use Only:

____ Approved ____ Not Approved ____ Conditionally Approved

Comments: _____

Approved By: _____ Date: _____

PLEASE RETURN FORM AND PLANS TO:

**SPRING OAKS II HOMEOWNERS ASSOCIATION
ATTENTION: ARCHITECTURAL COMMITTEE
c/o P&G Association Management
129 West Lake Mead Parkway ~ Suite 16
Henderson, Nevada 89015
PHONE 702-202-4330 FAX 702-202-3910
stephen.pgam@outlook.com**

(please attach any pertinent drawings, permits, etc.)