

# Stone Mountain Preserve Homeowners Association

c/o Mutual Management Services, Inc.  
P.O. Box 27008 Phoenix, AZ 85061  
602-248-4466 602-248-4480 (fax) www.mmsaz.com

MMS DATE RECEIVED:

## ARCHITECTURAL REQUEST FORM FOR EXTERIOR and/or LANDSCAPE CHANGES

Name \_\_\_\_\_ Email \_\_\_\_\_ Phone (h) \_\_\_\_\_

Address \_\_\_\_\_ Lot # \_\_\_\_\_ Phone (c) \_\_\_\_\_

Start date: \_\_\_\_\_ Completion date: \_\_\_\_\_

**TYPE OF MODIFICATION:** Re-Painting \_\_\_\_\_ Landscaping \_\_\_\_\_ Windows(HxWxL) \_\_\_\_\_ Doors(HxWxL) \_\_\_\_\_  
Gate(HxWxL) \_\_\_\_\_ Fence(HxWxL) \_\_\_\_\_

Change to existing structure \_\_\_\_\_ Exterior changes \_\_\_\_\_ Add on Change \_\_\_\_\_ Other \_\_\_\_\_

### Description of Architectural request in detail, including:

Details: \_\_\_\_\_

Materials: \_\_\_\_\_

Dimensions: \_\_\_\_\_

Location: front/side/landscaping/windows/door/etc. \_\_\_\_\_

Describe your intent: \_\_\_\_\_

<b>PAINTING:</b>	<u>Color</u> (submit paint samples)	<u>Brand of Paint</u>	<u>LRV#</u> (light reflective value required) (19-62LRV)
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House	_____	_____	_____
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Trim	_____	_____	_____
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Windows	_____	_____	_____
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Doors	_____	_____	_____
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Gates	_____	_____	_____
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Fence	_____	_____	_____
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**PLEASE SUBMIT ALL CHANGES WITH PAINT SAMPLES, A SCHEMATIC, PLANS, OR ADDITIONAL INFO. PAGES ALLOW UP TO 30 DAYS FOR WRITTEN RESPONSE**

The homeowner agrees to maintain the improvement, if approved by the Architectural Committee.

The homeowner agrees to comply with all city, county, and state code laws and must obtain all necessary permits.

\_\_\_\_\_  
Homeowner signature

\_\_\_\_\_  
Date

### ARCHITECTURAL COMMITTEE USE ONLY:

\_\_\_\_\_ APPROVED      \_\_\_\_\_ APPROVED WITH MODIFICATIONS      \_\_\_\_\_ DISAPPROVED

\_\_\_\_\_  
Architectural Committee Signatures

\_\_\_\_\_  
Date

(revised 8/14)