Architectural & Landscaping Request Form – Basalt Vista HOA

Date Submitted:	Name of Homeowner:	
Address:		
Phone: (H) (V	V) (C)	Email:
work may be commenced until the inspect the modification after the	e homeowner receives final are work is completed to insure ensure that the requested im	rovements must be pre-approved by the Board of Directors. No approval in writing. The Board of Directors reserves the right to it was completed as approved. Please consult the governing provement complies with the guidelines of our neighborhood.
TYPE OF IMPROVEMENT: AI	RCHITECTURAL LANI	OSCAPING
*A separate request form is require **If requesting that a dead HOA Sh		et. Replace HOA Shrub/Tree line below and submit form.
Replace HOA Shrub/TreeAd	ditionFenceExterior Pa	intingDeckPatioStorm DoorPergola
PorchAwningGazebo	PlantingsAdd or Expand	Natural AreaAdd borderSod Lawn
Other (Specify)		
PLEASE FILL OUT A DETAILED DE	ESCRIPTION OF THE PROPOSI	D IMPROVEMENT:
changes in relation to the building,	landscaping, and property line of a fence type) (3) Detailed p	Copy or sketch of the plat map of your address showing proposed (2) Photos/pictures of samples of structure/improvement plan ans or drawings including 3 views (front, side, top); must show ties, additions, removals)
Size/Dimensions:		Color:
Material:		
Exterior Finish:		Roof Design:
Contractor Name, Address, Phone # (if applicable)		
Will the change affect the grade of your lot or your neighbor's lot?		
be returned and will not be conside by the Board of Directors does no	red until all the required inform t constitute approval of local C	ormation for clarification purposes. Incomplete applications will ation is provided to the Board of Directors. I understand approval ity/County building departments and that a building permit or improvements promptly after receiving approval.
Estimated Start Date (Please allow 30 d	ays for ACC decision):	Estimated Completion Date:
Signature:		Date:
Please mail to Silver Mountain admin@smprop.com	Properties, 326 Hwy 133, Sui	te 290, Carbondale, CO 81623, or send via email to:
ACC/BOD ACTION:		
Date Received:	Date to ACC:	Approval/Denial Date:
Approved By:		
Reason for Denial (if applicable):		