

**MOUNTAIN GLEN
HOMEOWNERS ASSOCIATION
ARCHITECTURAL REQUEST FORM**

I. REQUESTER SECTION

Name: _____ Date of Request: _____
Address: _____ Lot: _____

DETAIL SPECIFICATIONS (Size, width, height, length, color, etc.) One item per request form.

Sketch Submitted: _____ Plans Submitted: _____
Brochure Submitted: _____ Picture Submitted: _____

Detailed description of change:

Neighbor Acknowledgement:

_____ Name/Address	_____ Name/Address
_____ Name/Address	_____ Name/Address

Submit by Certified Mail: Architectural Committee.
C/O SCVPM
25379 Wayne Mills Pl., #389
Valencia, CA 91355
Or Fax 661/294-9858

- ** Or Hand Deliver to a Board of Directors meeting.**
- ** Construction must be completed within 6 months of the date of approval.**

II. APPROVAL SECTION (COMMITTEE ONLY)

- ____ Approved as submitted
- ____ Approved with the following conditions of change below.
- ____ Rejected for the following reasons:

Authorized Signature Date