

Architectural & Landscape Revision Application

Oro Valley Country Club Estates

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amemanagement@comcast.net

Lot # _____ Date _____

Owner(s) _____ Phone _____

Address _____

Type of Project _____

Color Scheme _____ Construction Materials _____

Dimensions _____

Work Done By Self _____ Contractor _____

Phone # _____ Planned Date of Completion _____

Please sketch your project below (or attach second sheet)

ALL NECESSARY TOWN OF ORO VALLEY AND/OR COUNTY PERMITS MUST BE OBTAINED FROM THE PROPER AGENCIES. TO PROMOTE AN ATTITUDE OF SHARING AND NEIGHBORLINESS, THE BOARD ENCOURAGES YOU TO DISCUSS YOUR PROJECT WITH ADJOINING NEIGHBORS. IN ORDER FOR THE ARC TO CONSIDER AND RENDER A DECISION, TWO COMPLETE SETS OF PLANS MUST BE SUBMITTED TO AME OR THE ARC CHAIRMAN.

DATE APPROVED _____ COMMENTS _____

PLEASE PRINT

Project completed: Date _____ Signed _____

Mail copy when project is completed and signed to AME at address on top of this application.

If additional time is needed for project completion, forward information to the ARC committee via AME.