

Villa Caballeros Homeowners Association Architectural Variance Change Request

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UNIT NUMBER:			DATE:			
NAME OF OWNER(S):						
To the Architectural Commi	ttee and B	oard of Directo	rs			
We, the undersigned owner permits for home improvem responsibility for obtaining puthe City does not constitute	ents may l permits and	be required by the subsequent in	the City of F	Palm Spring vill be borne	s and that the by us. We ι	e cost of the permit and understand that approval by
DESCRIPTION:						
TOTAL COST EST.						
START DATE:			COMPLE	TION DATE	:	
CONTRACTOR: (name, address, phone)						
CONTRACTOR LICENSE NUMBER			CONTRA			
(State of California)			(attach certif	icate of liability)	
We acknowledge that all apneeded of existing sprinkler resulting from construction, expense; and that maintena	systems, alterations	underground ut s or changes or	tilities, build iginating fro	ing structure m these pe	e and exterion rmitted impro	r landscaping or damage
OWNER(S) SIGNATURE:						
MAILING ADDRESS:						
PHONE:			EMAIL:			
Please provide as much de Please attach additional sho						
Villa Caballeros Homeowne 1111 Tahquitz Canyon Way Email: <u>canderson@mehill.c</u>	y, Suite 10					
BOARD DECISION:		APPROVE:			REFUSE:	
NAME:		TITLE:			DATE:	