

**SAGUARO CANYON
ARCHITECTURAL IMPROVEMENT
APPLICATION & REVIEW FORM**

To be submitted prior to any exterior alterations

Owner Address: _____ Date: _____

Owner Name: _____ Phone: _____

Email Address: _____

Description of Improvement: _____

Color (if applicable) _____

(Must include color samples)

Location (if applicable) _____

Dimensions (if applicable) _____

Construction material _____

Estimated starting date: _____ Estimated completion date: _____

Attach to this application a sketch of all improvements showing the location and dimensions

Send to: Snake River Homeowners' Association Management Company

845 E. Fairview Rd Ste. 120 -Meridian, Id. 83642

Phone: 208- 855-0505 Fax: 208-855-0526

Email to: nboucher@snakeriverhoa.com

For ACC Use Only

Date Received: _____ **By:** _____

Initial Inspection by: _____ **Initial Inspection Date:** _____

Approved* **Disapproved (reason):** _____

*****Homeowner must request final approval upon completion of improvement*****

Final Inspection by: _____ **Final Inspection Date:** _____

Items required for project completion: _____

**ACC approval is subject to homeowner compliance with City of Meridian permitting and Unified Development Code.*