

Vista Serena HOMEOWNERS ASSOCIATION
ARCHITECTURAL IMPROVEMENT
APPLICATION AND REVIEW FORM

Unit / Lot Owner: _____ Date: _____

Property Address: _____ Phone: _____

Nature of Improvement: _____

Color (if applicable): _____

Location (if applicable): _____

Dimensions (if applicable): _____

Construction Material (if applicable): _____

Supplier: _____ Approximate Cost: _____

(One set of plans of all improvements must be attached to this application to show location and dimensions.)

Send to:

Vista Serena Homeowner Association
C/O Desert Resort Management – An Associa Company
42-635 Melanie Place, Suite 103
Palm Desert, CA 92211
OR FAX TO:
760-346-9918

Signed: _____ Date Submitted: _____

FOR INTERNAL USE ONLY

Date Received: _____

Inspection on (if necessary): _____ By: _____

Approved On: _____ Disapproved On: _____

Signed: _____