

ARCHITECTURAL VARIANCE REQUEST
Los Lagos Architectural Committee
40-004 Cook Street, Suite 5, Palm Desert, CA 92211
Phone: (760) 345-2449 info@brpcam.com

Homeowner Request

Homeowner(s): _____ Date: _____

Address: _____

Phone: _____ Contact Email: _____

1. **Architectural Change:** We have read and agree to abide by the Architectural restrictions in Articles II, III, IV & V et all of the 2009 Amended CC&Rs, and in the 2011 Los Lagos Rules and Regulations booklet. We agree to a professional installation.

Request:

Attached are complete drawings of the proposed work and descriptions of all materials to be used. A copy of the City Building Permit will be submitted if applicable.

Starting Date: _____ Estimated Completion Date: _____

Homeowner Signature: _____ Date: _____

Before hiring a contractor, check on License number by calling 1-800-321-2752

Response from Architectural Committee ***Date:*** _____

APPROVED () *REJECTED () PENDING Additional Information ()

COMMENTS: _____

Chairperson

Board Representative

Board Representative

***Homeowner has the right to appeal an unfavorable decision to the Board of Directors**