

**LOMAS ENCANTADAS MASTER ASSOCIATION  
REQUEST FOR HOME IMPROVEMENT/ALTERATION APPROVAL**

In an effort to provide and protect each individual homeowner's rights and values, it is required that any homeowner considering improvements and/or change to the exterior of their lot or home must submit a REQUEST FOR HOME IMPROVEMENT/ALTERATION APPROVAL FORM to the Architectural Committee for planned improvements and /or changes. If any change is made that has not been approved, the Committee has the right to require the homeowner to remove the improvement and/or change from the property. PLEASE COMPLETE THIS FORM IN DETAIL AND ALLOW THE ARCHITECTURAL COMMITTEE 60 DAYS FOR REVIEW AND A DECISION. ADDITIONAL INFORMATION REQUESTED WILL DELAY THE REVIEW PROCESS SO PLEASE PROVIDE AS MUCH INFORMATION AS POSSIBLE.

DATE: \_\_\_\_\_ PRINT NAME OF OWNER: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

HOME #: \_\_\_\_\_ WORK #: \_\_\_\_\_ CELL #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

1. Briefly describe the improvement/change proposed: (include size and height)
  
2. Who will do the actual work? (For your protection, we recommend that you use a license, bonded, and insured contractors).
  
3. Location of improvement (check applicable areas). YOU MUST ATTACH A LOT SURVEY OR SCALE DRAWING TO SHOW LOCATION OF IMPROVEMENT IF APPLICABLE. (Include distances from walls and houses)

<input type="checkbox"/> Front of House	<input type="checkbox"/> Back of House	<input type="checkbox"/> Side of House
<input type="checkbox"/> Roof	<input type="checkbox"/> Patio	<input type="checkbox"/> Garage
<input type="checkbox"/> Other: _____		

Setback from side wall(s): \_\_\_\_\_ Setback from back wall (s): \_\_\_\_\_

4. Material necessary for proposed improvement/change (check and identify types and colors: MUST ATTACH ONE (1) PAINT/STAIN SAMPLE OF EACH COLOR

<u>MATERIAL</u>	<u>TYPE/COLOR</u>
<input type="checkbox"/> Paint	_____
<input type="checkbox"/> Stain	_____
<input type="checkbox"/> Lumber	_____
<input type="checkbox"/> Brick	_____
<input type="checkbox"/> Screen	_____
<input type="checkbox"/> Shingles	_____
<input type="checkbox"/> Pipe	_____
<input type="checkbox"/> Electrical	_____
<input type="checkbox"/> Fence	_____
<input type="checkbox"/> <b>Other</b>	_____

A LOT SURVEY OR TO SCALE DRAWING SHOWING PROPERTY LINES, RESIDENTIAL BUILDINGS, EASEMENTS, WALLS, ETC., IS REQUIRED FOR ALL APPLICATIONS FOR BUILDING, DECKS, PATIO COVERS, SIDEWALKS, DRIVEWAYS, PLAYGROUND EQUIPMENT, ETC.

**Owner's Affidavit:**

1. To my knowledge, nothing in the proposed improvement/alteration is in violation of the Master Declaration of Covenants, Conditions and Restrictions of the Lomas Encantadas Master Association (the Deed Restrictions) as applicable to the subject lot.
2. I represent and warrant that the proposed improvement/alteration will be completed in strict compliance with the Deed Restrictions.
3. I understand that approval by the Architectural Committee shall in no way be construed as a waiver of modification of the Deed Restrictions.
4. I represent and warrant that the proposed improvement/alteration will be in conformity and harmony of external design and location to the surrounding structures and topography, and that the quality of workmanship and materials involved will be in conformity with that of the existing structure.
5. I understand that it is my responsibility to conform to any city, county, state, federal, or other agency building codes and ordinances that may apply to this improvement/alteration and that approval by the Architectural Committee shall in no way be construed as a waiver as such.
6. I agree that no construction or other work on this improvement/alteration shall commence until I have received the written approval from the Association Architectural Committee. I understand that the Association Architectural Committee will act on this request as quickly as possible and contact me regarding their decision.

\_\_\_\_\_  
Proposed Construction Start Date

\_\_\_\_\_  
Proposed Completion Date

\_\_\_\_\_  
Signature of Homeowner

**RETURN TO:**  
**LOMAS ENCANTADAS MASTER ASSOCIATION**  
**c/o Silver Sage Realty**  
**P.O. Box 44123**  
**Rio Rancho, NM 87174**  
**Phone: (505) 377-1017**  
**Email: associations.ssr@gmail.com**