CALIFORNIA STONEGATE ARCHITECTURAL SUBMISSION FORM

DATE:	
	ADDRESS:
	WORK/CELL:
E-MAIL:	
Submittal For: Landscape Hardscape / Other:	/ LandscapePoolSpaPatio Cover
Proposed Start date: Expected Comple	letion Date:
Description of Project:	
Adjacent Neighbors' Review:	
Left side (Facing House):	
(Please Print Name)	(Address)
(Signature) (Date)	
Right side (Facing House):	
(Please Print Name)	(Address)
(Signature) (Date)	
Rear Neighbor:	
(Please Print Name)	(Address)
(Signature) (Date)	
	this request shall commence until written approval has been grante e all Improvement and maintain my lot in accordance with my
(Owner's Signature) (Date)	(Owner's Signature) (Date)
ARCHITECTURAL COMMITTEE USE ON	NLY:
[]APPROVED []DISAPPROVED []] ADDITIONAL INFORMATION NEEDED (SEE COMMENTS BELOW)
(ARCHITECTURAL COMMITTEE SIGNATURE)	(DATE)