## PACIFIC DEERFIELD OWNERS ASSOCIATION ARCHITECTURAL (ARC) CHANGE REQUEST FORM

## \*\*\*PLEASE SUBMIT APPLICABLE PLANS, PICTURES, DRAWINGS, PERMITS, ETC. THIS WITH APPLICATION\*\*\*

Mail to: PACIFIC DEERFIELD	Date:
OWNERS ASSOCIATION	
C/O Epic Association Management	
8712 Spanish Ridge Ave	
Las Vegas, NV 89148	
General@epicamlv.com	
Unit Owner's Name:	
Unit Address:	
Home Phone:	_Work Phone:
Mailing Address (if different):	
Name, Address and Phone of Owner's Representa	tive/Architect/Contractor:
To be constructed by:	Phone:
T	
I request approval of the installation of the following	ing improvement(s) to my Unit/residence:
Estimated Start Date:	Estimated Completion Date:
Will a construction dumpster be required?	Yes No
If yes, where are you requesting to place it?	
Owner Signature:	Date:
****DO NOT WRIT	E BELOW THIS LINE****
*************	*************
Date Received:	Meeting Date:
( ) APPROVED ( ) REJECTED	( ) CONDITIONAL APPROVAL
Comments:	
***	
	<del>-</del>
Committee/Board Member	Date: