



PGA WEST™
RESIDENTIAL ASSOCIATION, INC.

LANDSCAPE CHANGE REQUEST FORM

(THE ASSOCIATION DOES NOT PERFORM OR PAY FOR ANY OF THE WORK REQUESTED ON THIS FORM.)

Homeowner's Name: _____

Homeowner's Signature: _____ Date: _____

Address: _____

Telephone- Home: _____ Mobile: _____

Description of Requested Changes:

*** A PLAN IS TO BE SUBMITTED WITH ALL REQUESTS ***

Approved: Yes _____ No _____

(Association Representative) Date: _____

Who Performs The Work:

(If contractor performs the work, provide name, telephone number, address, license number and insurance certificates. NOTE: Certificates must be sent directly to the Association from the contractor's insurance carrier)

Remarks:

PLEASE NOTE

1. THIS FORM IS NOT TO BE USED FOR ANY CHANGES THAT INVOLVE HARDSCAPE MODIFICATIONS.
2. INSTALLING ARTIFICIAL TURF REQUIRES A MAINTENANCE & INDEMNITY AGREEMENT.
3. IRRIGATION MUST BE RETROFIT IN AREAS WHERE ROCK WILL BE INSTALLED.



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LANDSCAPE CHANGE REQUEST FORM - NEIGHBOR NOTIFICATION

IF THE WORK YOU ARE REQUESTING TO DO ON THE LANDSCAPE CHANGE REQUEST FORM IS IN VIEW OF ANY OF YOUR NEIGHBORS, TO EITHER SIDE OF YOUR UNIT, YOU MUST NOTIFY THEM OF THE PROPOSED PROJECT AND HAVE THEM COMPLETE THIS FORM.

IS THE NEIGHBOR NOTIFICATION REQUIRED? YES _____ NO _____

IF YES, THE INFORMATION BELOW NEEDS TO BE PROVIDED.

Neighbor's Name: _____

Address: _____

Telephone: _____

Neighbor's Signature: _____

Remarks:
