**San Ignacio Heights HOA**

**Common Area Landscape Maintenance Requests**

**(Rev 2/20/2025)**

Any landscaping work done in HOA common areas must be approved by the Landscaping Committee, whether performed by our contracted maintenance firm, a resident or outside contractors. The following form is is required to approve any common area maintenance work.

Completed forms can be emailed to **Don Julien** at **presidentsihhoa@gmail.com** or mailed to

**Landscape Committee**

**San Ignacio Heights HOA**

**P O Box 526**

**Green Valley AZ 85622-0526**

Don can be contacted at the above email address or by phone at ***509-881-4092.***

**SAN IGNACIO HEIGHTS, INC**

**COMMON AREA**

**LANDSCAPE REQUEST FORM**

**(Rev 10/12/2024)**

**PLEASE PRINT ALL ITEMS BELOW**

Who will perform the work \_\_\_ HOA \_\_\_ Homeowner \_\_\_Contractor (At homeowner’s expense)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe in detail the work requested to be performed. Use the other side if you need more space.

**(Any changes in plan requires a new Landscape Request Form to be submitted.)**

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The below is for Landscape Committee/Board Use Only**

Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Decision by Landscape Committee \_\_\_\_\_ Approved \_\_\_\_\_ Denied Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Decision by Board (if necessary) \_\_\_\_\_ Approved \_\_\_\_\_ Denied Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature of Landscape Committee Member or Board Member

**Meets Criteria List Guidelines (if applicable) \_\_\_\_\_ Yes \_\_\_\_\_ No**

**Date Requested Work Was Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**