Havasu Mobile Estates Association

Architectural Committee Variance Application

Name:	Date:
Address of Project:	Lot #:

1. Describe the variance requested. (Attach separate sheet as necessary)

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_____

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2. Describe any extraordinary and exceptional conditions pertaining to the property, as well as the practical difficulty this variance is intended to overcome.

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3. How will this variance prevent an unnecessary hardship in the application of the protective CC&Rs?

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4. Describe how this variance will not materially injure any property or improvements of adjacent properties or confer upon the applicant's property privileges denied to similar properties.

_____
_____

_____
_____

Signature of Applicant: _____

Send this form with any supporting documentation to:
Havasu Mobile Estates Association, Attention Architectural Control Committee
P.O. Box 1747, Havasu Lake, CA 92363
havasumobileestatesinc@outlook.com

ACC use below this line
Comments / Recommendations to Board:

_____
_____

Signed: _____ Date: _____

Board of Directors use only below this line

Signed: _____ Date: _____