



Supplemental Plant Trimming Request

This form is for homeowners who wish to remove or trim plants in our community's common areas. Please review and understand the Supplemental Plant Trimming Policy. Please return the completed form to our property manager.

	Today's Date:		Lot #:	
Print Name:		Home Phone:		
Email:		Mobile Phone:		
Street Address:		Planned start date:		
Signature:		Planned end date:		

PLEASE NOTE: If your request is approved by the CCE Board, the following rules apply:

- Unless otherwise agreed by the CCE Board, all work will be performed at homeowner expense.
- Debris removal and cleanup is the responsibility of the homeowner.
- Care shall be taken to minimize damage to the surrounding landscape.
- The stumps of all removed plants must be ground below grade and backfilled with surrounding soil to grade.
- The quality of the work is the responsibility of the homeowner. If excessive trimming occurs beyond what is approved that causes damage to plants, or negatively impacts aesthetics, the homeowner will be responsible for remediation and/or replacement costs.
- All tree trimming must be performed by the CCE contracted landscape maintenance company under the supervision of a qualified arborist.

1. Provide information on each plant you are requesting to be removed or trimmed				
Plant Type (Describe)	Plant Location (Describe)	Work Requested		Reason For removal or trimming
		Remove	Trim	
2. Describe how you plan to access the common area to do the work				
Vehicular access to the common area is limited. Any damage must be repaired.				

3. Have you discussed your plans with your neighbors on each side of your home, and immediately behind your property and did you get their approval for your plans?
4. Draw below or attach an image to show the approximate location of the plants you are asking to be trimmed or removed in relation to your lot.

Submit this request to our management representative, Paul Ortiz at paul@ciphoa.com.
 Cornerstone Properties, Inc.
 P.O. Box 62073
 Phoenix, AZ 85082
 Office: (602) 433-0331 X107 FAX: (602) 244-9214

Please do not write below this line:

Date Reviewed:	Decision: Approved <input type="checkbox"/> Disapproved <input type="checkbox"/>
Signature:	
Reason for Disapproval:	
Additional Comments:	