

Aspen Village HOA

MINOR IMPROVEMENT APPLICATION**

Date of Application: _____

Lot #: _____

Name/s: _____

Mailing Address: _____ t

Phone/s: _____

Emergency Contact Name & Phone: _____

Brief description of your intentions/improvements: _____

Pitkin County Permit Needed? Will
project require any digging?

PROOF OF LIABILITY INSURANCE REQUIRED FOR ANY DIGGING

If YES, for either, please describe: _____

Expected Construction Period (dates): _____

Name & Lot Numbers of Adjacent Neighbors: (use back of sheet if necessary)

1. _____

2. _____

3. _____

**Submit this form, proof of insurance (if necessary) along with 3 copies of your plans 2 weeks prior to the ACC meeting you will be attending.

**Submissions should either be mailed or emailed to:

Aspen Village Homeowners Association
31 Aspen Village
Aspen CO, 81611

hoa@aspenvillage.info