SINGLETREE RANCH HOMEOWNERS ASSOCIATION, INC. APPLICATION FOR DESIGN REVIEW

All applications for changes to the exterior of your residence must be submitted to the Architectural Design Review Committee/Board of Directors. The Association's Covenants, Conditions and Restrictions (CC&Rs) require that a homeowner obtain the prior written approval for any structural change, alteration or addition to a property within the community. (See article III in the CC&R's)

Please note that approved applications must be completed in a timely manner. A project completion date is required on the Application. If additional time is required for you to finish your project, an extension request is listed on the second page of these forms. **EACH REQUEST REQUIRES ITS OWN APPLICATION.**

To comply with the CC&Rs, please submit this application with all the required attachments to:

Singletree Ranch HOA c/o Vision Community Management

16625 S Desert Foothills Pkwy • Phoenix, AZ 85048 Phone: (480) 759-4945 • Fax: (480) 759-8683

Email: SingletreeRanch@WeAreVision.com • Website: www.wearevision.com

If you have not received any form of communication from the Committee or the Association after (45) days, please call Vision Community Management for an update.

Homeowner's Mailing Address:				
City:			Lot #:	
Property Address:				
Phone:				
The undersigned hereby submits it the Board of Directors for review ar Painting of Residence - Schem	nd approval of the foll	owing item(s)	:	
Body:	Trim:		Accents:	
Pop-Outs:	Garage:		Front Door:	
Other:				
Installation of Landscaping	Revamping of landscaping			
Addition of:	Addition of:		to/on the residence (building)	
Addition of:			to/on the lot (property/land)	
Installation of a pool/spa				
Other (please specify):				

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Attached please find plans a appropriate):	and/or specifications of the	above marked items for ap	plication, which includes (if		
Dimensions (height, w	idth, length)	Sample of color(s) to b	pe used		
Drawings		Plant type and location			
Samples or description	ns of materials to be used	Type of material			
Photographs or sample	e elevations for a visual pict	ure of the proposed project			
Person doing installation	on/work:				
Licensed contractor:	Yes No				
Expected completion date	:	-			
Please notify me atnot be complete in order to disapprove the Application a with all applicable City, Coudrawing will be retained for t	o determine approval or dind return it to me with a state anty, and State laws and to	isapproval, the Architectura ement for the disapproval. ⁻	al Committee or Board will The owner agrees to comply		
COMPLETION DATE EXTE	NSIONS are available if requ	uired. If this application is re	equesting an extension what		
is that date:					
Homeowner's Signature		Date:			
	FOR ASSOCIAT Architectural Committee				
Approves the above a	oplication				
Approves the above ap	oplication with the following	conditions:			
Disapproves the above	e application for the following	g reason(s):			
 Signature:		Date:			
Date Received	Mailed to Committee	Received from Committee	Mailed to Homeowner		
Date Received	Ivialied to Committee	Received from Committee	Ivialied to Homeowilei		