STRAWBERRY HILL VILLAGE APPLICATION FOR DESIGN REVIEW

All applications for changes to the exterior of your residence must be submitted to the Strawberry Hill Village 's 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.

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:

Strawberry Hill Village

c/o Vision Community Management 16625 S Desert Foothills Pkwy • Phoenix, AZ 85048 Phone: (480) 759-4945 • Fax: (480) 759-8683

Email: StrawberryHillVillage@WeAreVision.com • Website: www.WeAreVision.com

If you have not received any form of communication from the Committee or the Association after (30) days, please call Vision Community Management for an update.

Homeowner's Name:			
Homeowner's Mailing Address:			
City:			
Property Address:			
	Email:		
The undersigned hereby submits the Board of Directors of Strawber Painting of Residence - Scher	ry Hill Village for revie	ew and approv	al of the following item(s):
Body:	Trim:		Accents:
Pop-Outs:	_Garage:		Front Door:
Other:			
Installation of Landscaping		Revamping of	landscaping
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 and/or specifications of the appropriate):	e above marked items for application, which includes (if
Dimensions (height, width, length)	Sample of color(s) to be used
Drawings	Plant type and location
Samples or descriptions of materials to be used	Type of material
Photographs or sample elevations for a visual pic	cture of the proposed project
Person doing installation/work:	
Licensed contractor: Yes No	
Expected completion date:	_
not be complete in order to determine approval or disapprove the Application and return it to me with a sta	re any questions. I understand that should the application disapproval, the Architectural Committee or Board will attement for the disapproval. The owner agrees to comply o obtain all necessary permits. This application and the
COMPLETION DATE EXTENSIONS are available if red	quired. If this application is requesting an extension what
is that date:	
Homeowner's Signature	Date:
	TION USE ONLY ral Committee or Board of Directors
Approves the above application	
Approves the above application with the following	g conditions:
Disapproves the above application for the following	ng reason(s):
Signature:	Date: