## QUEENLAND MANOR HOMEOWNERS ASSOCIATION APPLICATION FOR DESIGN REVIEW

All applications for changes to the exterior of your residence/lot must be submitted to the Queenland Manor Homeowners Association's Architectural Committee/ Board of Directors. The Queenland Manor Homeowners Association's Covenants, Conditions and Restrictions (CC&R's) require that a homeowner obtain the priorwritten approval for any exterior alteration or addition to propertywithin the Queenland Manor Community. (See Article 5 of 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.

## To comply with the CC&R's, please submit this application with all the required attachments to:

Community Manager

C/O Queenland Manor Homeowners Association 16625 S Desert Foothills Pkwy. Phoenix, AZ 85048 Phone: (480) 759-4945 Fax: (480) 759-8683

EMAIL: queenlandmanor@wearevision.com WEBSITE: www.wearevision.com

The time period for approval begins when this application is received by the Committee. The Committee has up to (45) days to approve, approve with conditions, or disapprove the application. If you havenot received any form of communication from the Committee or the Association after (45) days, please call the Community Manager for a status update.

Homeowner's Name					_		
Homeowner's Mailing Address							
City	_State	Zip	Phone	9	-		
Lot # or Lot Address					-		
The undersigned hereby subm Directors of Queenland Manor							
Painting of resid	ence	Oute	r building	Walls/fences			
Installation of lar	ndscaping		Revamping	of landscaping			
Addition of			to	o/on the residence (building)			
Addition of				_ to/on the lot (property/land)	)		
Installation of a	pool/spa						

(SEE REVERSE SIDE)

Other

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Attached please find plans appropriate):	and/or specifications of the a	above marked items for appl	ication, which includes (if		
Dimensions (h	eight, width, length)	Sample of Color(s)	to be used		
Drawings		Current roof color			
Type of materia	al	Plant type and location			
Samples or des	scriptions of materials to be use	d Property plat			
Any photograph	ns or sample elevations for a vis	sual picture of the proposed pro	oject.		
Person doing ir	nstallation/work				
Licensed cont	ractor? Yes No				
Expected Con	npletion Date:				
complete in order to determine and return it to me with a stater	if you have any if you have any approval or disapproval, the Arment for the disapproval. The ow ry permits. This application and	chitectural Committee or Board ner agrees to complywith all ap	will disapprove the Application oplicable City, County, and State		
COMPLETION DATE EXTENS	SIONS are available if required.	If this application is requesting	an extension what is that Date		
Homeowner's Signature		Date:			
Approves the above	FOR ASSOCIAT wners Association Archite Application Application with the following	ctural Committee or Board			
Disapproves the about	ove Application with the follo	wing Reason(s):			
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Date Appl. Received	Mailed to Committee	Rec'd From Committee	Mailed to Homeowner		