SUMMERFIELD AT LITCHFIELDS SUBDIVISION HOMEOWNERS ASSOCIATION APPLICATION FOR DESIGN REVIEW

All applications for changes to the exterior of your residence must be submitted to the Summerfield at Litchfields Subdivision Homeowners Association'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:

Summerfield at Litchfields Subdivision Homeowners Association

c/o Vision Community Management

16625 S Desert Foothills Pkwy • Phoenix, AZ 85048

Phone: (480) 759-4945 • Fax: (480) 759-8683

Email: SummerFieldLitchfields@wearevision.com@WeAreVision.com• Website: ww.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 in the Board of Directors of Summer and approval of the following item(s Painting of Residence - Scheme #	field at Litchfields Sul s):	bdivision Home	eowners Association for review	
Body:	_ Trim:	Accents	s:	
Pop-Outs: Ga	ırage:			
Front Door/Screen/Security Door:	C	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 a appropriate):	nd/or specifications of the	above marked items for ap	plication, which includes (if
Dimensions (height, wid	dth, length)	Sample of color(s) to b	e used
Drawings		Plant type and location	١
Samples or description	s of materials to be used	Type of material	
Photographs or sample	elevations for a visual pict	ure of the proposed project	
Person doing installatio	n/work:		
Licensed contractor:	Yes No		
Expected completion date:		-	
Please notify me at complete in order to determine a and return it to me with a statem State laws and to obtain all necessity.	pproval or disapproval, the Arc nent for the disapproval. The	chitectural Committee or Board owner agrees to comply with a	will disapprove the Application all applicable City, County, and
COMPLETION DATE EXTENS	ONS are available if required	d. If this application is reques	sting an extension what is that
date:			
Homeowner's Signature		Date: _	
Summerfield at Litchfiel	Board of I	wners Association Arch	nitectural Committee or
Approves the above ap	•		
Approves the above ap	plication with the following	conditions:	
Disapproves the above	application for the following	g reason(s):	
Signature:		Date:	
		Date.	