## Fairways at Los Portales Homeowners Association APPLICATION FOR DESIGN REVIEW

## **EACH REQUEST REQUIRES ITS OWN APPLICATION**

All applications for changes to the exterior of your residence must be submitted to the Fairways at Los Portales 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.

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

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

Email: FairwaysLosPortales@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 Name:			
Homeowner's Mailing Addre	ess:		
City:	State:	Zip:	Lot #:
Property Address:			
	Email:		
The undersigned hereby sub- the Board of Directors of Fair of the following item(s): Painting of Residence - S	ways at Los Portales H	lomeowners Associa	tion for review and approval
Body:	Trim:	Acc	cents:
Pop-Outs:	Garage:	Fr	ont Door:
Other:			
Installation of Landscaping Revamping		Revamping of lar	ndscaping
Addition of:		t	o/on the residence (building)
Addition of:		t	o/on the lot (property/land)

Installation of a pool/spa

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Other (please specify):	
Any additional information will require a	a separate page included with the application.
Attached please find plans and/or specifications of t appropriate):	he 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	d Type of material
Photographs or sample elevations for a visual p	picture of the proposed project
Person doing installation/work:	
Licensed contractor: Yes No	
Expected completion date:	
disapprove the Application and return it to me with a s	ave any questions. I understand that should the application or disapproval, the Architectural Committee or Board will statement for the disapproval. The owner agrees to comply to obtain all necessary permits. This application and the
COMPLETION DATE EXTENSIONS are available if	required. If this application is requesting an extension wha
is that date:	
Homeowner's Signature	Date:
	ATION USE ONLY ers Association Architectural Committee
<del></del>	ng conditions:
	wing reason(s):
Signature:	Date: