

**AVALON VILLAGE COMMUNITY ASSOCIATION
ARCHITECTURAL DESIGN REVIEW FORM**

Please send completed form to:
C/O VISION Community Management
16625 S Desert Foothills Pkwy
Phoenix, AZ 85048
P: 480-759-4945 F: 480-759-8683
Email: avalonvillage@wearevision.com

Name _____ Date: _____

Property Address _____ Daytime Phone: _____

Lot # _____ Email _____

Requesting Approval of: _____

Work to be performed by: _____ Licensed contractor? _____ Yes _____ No

Type of Material (attach any samples/pictures/brochures):

Color to be Used (attach any samples): _____

SUBMITTAL MUST INCLUDE A PLOT PLAN INDICATING LOCATION OF REQUEST AND INCLUDE ALL APPLICABLE MEASUREMENTS AND DIMENSIONS.

INCOMPLETE SUBMITTALS WILL BE DENIED Expected Completion Date: _____

I agree to comply with all applicable city and state laws, and to obtain all necessary permits. I also agree not to begin work until I have been notified in writing of the Design Review Committee's decision and will maintain all improvements to their original condition. I understand the Design Review Committee must review all submittals within 60 days. I agree that all submitted work will be completed within 90days from day of approval.

Owner's Signature _____ Date _____

For Committee & Office Use Only

____ Approved as submitted _____ Disapproved & Reason: _____

____ Approved subject to the following conditions: _____

Notes: _____

Committee Member Signature: _____ Date: _____