

# SIERRA VERDE COMMUNITY ASSOCIATION APPLICATION FOR DESIGN REVIEW

All applications for changes to the exterior of your residence must be submitted to the Sierra Verde Community 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. (See Article 5 in the CC&Rs)

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:**

SIERRA VERDE COMMUNITY ASSOCIATION  
c/o Vision Community Management  
16625 S Desert Foothills Pkwy • Phoenix, AZ 85048  
Phone: (480) 759-4945 • Fax: (480) 759-8683  
Email: SierraVerde@WeAreVision.com • Website: www.wearevision.com

If you have not received any form of communication from the Committee or the Association after (60) days, please call Vision Community Management for an update.

Homeowner's Name: \_\_\_\_\_

Homeowner's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Lot #: \_\_\_\_\_

Property Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The undersigned hereby submits its Application for Design Review to the Architectural Committee or the Board of Directors of Sierra Verde Community Association for review and approval of the following item(s):

\_\_\_\_ Painting of Residence - Scheme # \_\_\_\_\_

Body: \_\_\_\_\_ Trim: \_\_\_\_\_ Accents: \_\_\_\_\_

Pop-Outs: \_\_\_\_\_ Garage: \_\_\_\_\_ Front Door: \_\_\_\_\_

Other: \_\_\_\_\_

**\*FOR EXTERIOR PAINTING SUBMITTALS ONLY\*** – homeowner must initial each below, OR SUBMITTAL WILL BE DENIED:

\_\_\_\_ (Initials) I certify that the paint palette I have selected is from or matches identically the pre-approved Sherwin Williams' paint palettes.

\_\_\_\_ (Initials) I certify that the colors submitted for trim, body, & fascia are going to be painted as presented & approved.

\_\_\_\_ (Initials) I certify that I will paint according to the palette, and not mix or match colors from other palettes.

\_\_\_\_ (Initials) I have attached a photo of the home, AND photos of the homes on either side of my lot, as proof that these other homes do not share the same paint palette.

\_\_\_\_ (Initials) I have attached paint swatches that are required to be sent with the submittal and not just emailed or scanned.

\_\_\_\_ (Initials) I understand that if the above four criteria are not met, my submission will be AUTOMATICALLY DENIED.

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- 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): \_\_\_\_\_

Attached please find plans and/or specifications of the above marked items for application, which includes (if appropriate):

- 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 picture of the proposed project
- Person doing installation/work: \_\_\_\_\_
- Licensed contractor:  Yes  No
- Expected completion date: \_\_\_\_\_

Please notify me at \_\_\_\_\_ if you have any questions. I understand that should the application not be complete in order to determine approval or disapproval, the Architectural Committee or Board will disapprove the Application and return it to me with a statement for the disapproval. The owner agrees to comply with all applicable City, County, and State laws and to obtain all necessary permits. This application and the drawing will be retained for the Association's records.

COMPLETION DATE EXTENSIONS are available if required. If this application is requesting an extension what is that date: \_\_\_\_\_

Homeowner's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**FOR ASSOCIATION USE ONLY  
SIERRA VERDE COMMUNITY ASSOCIATION Architectural Committee or Board of Directors**

- Approves the above application
- Approves the above application with the following conditions: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Disapproves the above application for the following reason(s): \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Received	Mailed to Committee	Received from Committee	Mailed to Homeowner
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