SPRINGTREE CONDOMINIUM ASSOCIATION APPLICATION FOR DESIGN REVIEW

EACH REQUEST REQUIRES ITS OWN APPLICATION

All applications for exterior changes to your residence must be submitted to the Springtree Condominium 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 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:

Springtree Condominium Association c/o Vision Community Management

16625 S Desert Foothills Pkwy • Phoenix, AZ 85048
Phone: (480) 759-4945 • Fax: (480) 759-8683

Email: Springtree@WeAreVision.com • Website: www.WeAreVision.com

If you have not received any form of communication from the Committee or the Association after (30) days, please call the Community Manager for an update.

Homeowner's Name:				
Homeowner's Mailing Address	:			
City:	State:	Zip:	Lot or Unit #:	
Phone:		Email:		
the Board of Directors of Springtr item(s):	ee Condon	ation for Desig ninium Associa	n Review to the Architectural Committee or ation for review and approval of the following	
Installation of flooring:				
Addition of:			to/on the patio/balcony	
Structural change to the unit:				
Other (please specify):				

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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 use	ed 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:		
not be complete in order to determine approval disapprove the Application and return it to me with a	have 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 do to obtain all necessary permits. This application and the ls.	
COMPLETION DATE EXTENSIONS are available if	f required. If this application is requesting an extension what	
is that date:		
Homeowner's Signature	Date:	
	IATION USE ONLY Architectural Committee or Board of Directors	
Approves the above application		
Approves the above application with the follow	ving conditions:	
Disapproves the above application for the following reason(s):	owing	
Signature:	Date:	