## PARK ORLEANS TOWNHOUSES CORP. APPLICATION FOR DESIGN REVIEW

All applications for changes to the exterior of your residence must be submitted to the Park Orleans Townhouses Corp.'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:

Park Orleans Townhouses Corp. c/o Vision Community Management 16625 S Desert Foothills Pkwy • Phoenix, AZ 85048

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

Email: ParkOrleans@WeAreVision.com • Website: www.wearevision.com

If you have not received any form of communication from the Committee or the Association after (40) days, please call Vision Community Management for a status update.

Homeowner's Name:			
Homeowner's Mailing Address:			
City:			
Property Address:			
	Email:		
The undersigned hereby submits in the Board of Directors of Park Or item(s): Painting of Residence - Scher	rleans Townhouses C	orp. for review a	nd approval of the following
Body:	Trim:	Accents:	
Pop-Outs:	_ Garage:	Front Door:	
Other:			
Installation of Landscaping	Revamping of landscaping		
Addition of:		t	o/on the residence (building)
Addition of:		t	o/on the lot (property/land)
Installation of a pool/spa			
Other (please specify):			

## PARK ORLEANS TOWNHOUSES CORP. APPLICATION FOR DESIGN REVIEW PAGE TWO

Attached please find plans a appropriate):	and/or specifications of the	above marked items for ap	oplication, which includes (if	
Dimensions (height, wi	dth, length)	Sample of color(s) to b	pe used	
Drawings		Plant type and location	n	
Samples or description	s of materials to be used	Type of material		
Photographs or sample	e elevations for a visual pict	ure of the proposed project		
Person doing installation	on/work:			
Licensed contractor:	Yes No			
Expected completion date:		-		
Please notify me atnot be complete in order to disapprove the Application arwith all applicable City, Coudrawing will be retained for the	o determine approval or di nd return it to me with a state nty, and State laws and to	isapproval, the Architectura ement for the disapproval.	al Committee or Board will The owner agrees to comply	
COMPLETION DATE EXTER	NSIONS are available if requ	uired. If this application is re	equesting an extension what	
is that date:				
Homeowner's Signature	meowner's Signature		Date:	
Park Orleans Tov	-	TION USE ONLY ectural Committee or Bo	eard of Directors	
Approves the above ap	oplication with the following	conditions:		
Disapproves the above	e application for the following	g reason(s):		
Signature:		Date:		
Date Received	Mailed to Committee	Received from Committee	Mailed to Homeowner	