UNION HILLS 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 Union Hills 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: Union Hills Condominium Association

c/o Vision Community Management

16625 S Desert Foothills Pkwy • Phoenix, AZ 85048

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

Email: UnionHills@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 undersigned hereby submits its Application for Design Review to the Architectural Committee or the Board of Directors of Union Hills Condominium Association for review and approval of the following item(s):

Installation of flooring:	
Addition of:	to/on the patio/balcony
Structural change to the unit:	
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 pice	cture of the proposed project
Person doing installation/work:	
Licensed contractor: Yes No	
Expected completion date:	_
not be complete in order to determine approval or disapprove the Application and return it to me with a sta	ve any questions. I understand that should the application disapproval, the Architectural Committee or Board will atement for the disapproval. The owner agrees to comply o obtain all necessary permits. This application and the
COMPLETION DATE EXTENSIONS are available if re	quired. If this application is requesting an extension what
is that date:	
Homeowner's Signature	Date:
	TION USE ONLY chitectural Committee or Board of Directors
Approves the above application with the following	g conditions:
Disapproves the above application for the followi reason(s):	ng
Signature:	Date: