LAS COLINAS MORADAS HOMEOWNERS' ASSOCIATION, INC. APPLICATION FOR DESIGN REVIEW

EACH REQUEST REQUIRES ITS OWN APPLICATION

All applications for changes to the exterior of your residence must be submitted to the Las Colinas Moradas Homeowners' Association, Inc.'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:

Las Colinas Moradas Homeowners' Association, Inc. c/o Vision Community Management 16625 S Desert Foothills Pkwy • Phoenix, AZ 85048 Phone: (480) 759-4945 • Fax: (480) 759-8683 Email: LasColinasMoradas@WeAreVision.com • Website: www.WeAreVision.com

If you have not received any form of communication from the Committee or the Association after (45) days, please call Vision Community Management for an update.

Homeowner's Name:				
Homeowner's Mailing Address:				
City:	State:	Zip:	Lot #:	
Property Address:				
Phone:				
The undersigned hereby submits its the Board of Directors of Las Colina of the following item(s): Painting of Residence - Scheme	s Moradas Homeow	ners' Associatior	n, Inc. for review and approval	
Body:	Trim:	Accents:		
Pop-Outs:	Garage:		Front Door:	
Other:				
Installation of Landscaping	ing 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 pic	sture of the proposed project		
Person doing installation/work:			
Licensed contractor: Yes No			
Expected completion date:	_		
disapprove the Application and return it to me with a sta	e any questions. I understand that should the application disapproval, the Architectural Committee or Board will tement for the disapproval. The owner agrees to comply o obtain all necessary permits. This application and the		
COMPLETION DATE EXTENSIONS are available if rec	quired. If this application is requesting an extension what		
is that date:			
Homeowner's Signature	Date:		
Las Colinas Moradas Homeowners' Associa	TION USE ONLY tion, Inc. Architectural Committee or Board of ctors		
Disapproves the above application for the followir	ng reason(s):		
Signature:	Date:		